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ABSTRACT

This document is the third part of a 3-part report on the development of a generic State Educational Agency Data Analysis Plan (SDAP). It consists of a compendium of data available by program within the studied State education agencies. The compendium provides a direct comparison of the information elements that are available by program in the two SEAs and in the Federal/State data system. These comparisons from a partial basis for the SDAP tables, since the data availability was used as a direct indication of where a given type of data or information could be found at the SEA level. This part also contains explanations of the tabular presentations and of special notations used in these presentations. It also briefly defines the relationship of this compendium or a similar SEA-specific one in the utilization of the SDAP - Model I by other SEAs. Related documents are EA 004 869 and EA 004 870. (Author)



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THE DEVELOPMENT OF A MODEL STATE DATA ANALYSIS PLAN (SDAP)

(PHASE I)

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PART III

THE SDAP DATA COMPENDIUM

Submitted to

The State of Ohio

Department of Education

for

The Joint Federal/State User's Guide Task Force

by

Scientific Educational Systems, Inc.

Silver Spring, Md.

31 December 1971

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FOREWORD

This document is Part III of a three part report on the development of a generic State Educational Agency Data Analysis Plan (SDAP - Model I). This development has been performed by Scientific Educational Systems, Inc., under subcontract to the Ohio State Department of Education acting as agent for the Joint Federal/State Task Force on Evaluation and the U. S. Office of Education. This effort was undertaken at the request of the User's Guide Task Force (a sub group of the Federal/State Task Force) interested in the development and dissemination of products usable by the State Educational Agencies (SEA's). This generic SDAP is intended to be usable by SEA's as an illustrative model of how State and Federal data can be used to answer some of the many diverse information needs related to management of educational support programs operated by and within the SEA's.

Part I of this report presents additional background information as well as describing the developmental process followed in producing the SDAP - Model I. Part I contains an overview of the entire effort and the resulting products and discusses how these products can be used by SEA's as a model for their own development of specific data analysis plans. It also contains a detailed description of the Developmental Process which was followed in this effort. This latter product is intended to serve as a general guide to SEA personnel interested in either further extension of the current products or undertaking the independent development of data analysis plans for their SEA's.

Part II contains the SDAP - Model I, itself, the major product of the study. This consists of a set of analysis statements directed at defining answers to a series of questions pertinent to the management of SEA programs. The SDAP itself is presented in a series of tables containing: (a) the questions derived through the study for each of fifteen programs found common to the two SEA's studied; (b) the suggested data analysis to provide the answer sought; and (c) the probable source of the data required for analysis, (these sources include both State and Federal data streams.) This Part also presents a description of what each of these elements is and how the plan can be utilized within the context of the SEA data analysis concepts.

Part III consists of a compendium of data available by program within the studied SEA's. The compendium provides a direct comparison of the information elements which are available by program in the two SEA's and in the Federal/State data system. These comparisons form a partial basis for the SDAP tables, since the data availability was used as a direct indication of where a given type of data or information could be found at the SEA level. This part also contains explanation of the tabular presentations and of special notation used in these presentations. It also briefly defines the relationship of this compendium or a similar SEA-specific one in the utilization of the SDAP - Model I by other SEA's.

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INTRODUCTION

This compendium present. a listing and comparison of the data elements found for each program in the two SEA's studied in detail. These listings of data found in Connecticut and Colorado programs have been compiled to support the development of the SDAP - Model I. These listings have been used in both the definition of analysis statements to answer questions and the identification of probable data sources in the SDAP. It is also anticipated that this compendium may be useful to SEA personnel interested in developing their own data analysis plan: the data sets defined here and the comparisons to the Federal/State data system should be helpful in locating local data sets already existing or in defining new needs for data collection. Additional discussion of the use of this compendium in relation to the SDAP - Model I is presented in Part I.

The following sections describe the purpose and scope of the compendium and the process and special nomenclature used in its preparation. Purpose and Scope

The Compendium provides, in tabular form, a description of the program data availabilities in Connecticut and Colorado and identifies the commonalities and differences in data across the states and in relation to the Federal/State Data System instruments*. This comparison of data availabilities allows the identification of: (1) those data types which are identical in both States, (2) those data types which are used in one state but which are not available in the other, and (3) those data types which are similar across the States and Federal/State Data System, but which are not identical.



^{*} This general term (abbreviated F/SS) includes the following instruments: The Consolidated Program Information Report (CPIR), The Elementary School Survey-District Questionnaire (ESS-Di), Principal Questionnaire (ESS-Pr), Teacher Questionnaire (ESS-Te), and Pupil Questionnaire (ESS-Pu).

This categorization of data types allows the identification of those identical items which may be used to answer questions specified in a State Data Analysis System designed for use by more than one state; and also those data types which, despite differences of a specified nature, may still be found useful for answering SDAP questions.

The compendium was constructed by program for each of the Common Programs and includes a section entitled "General Statistics" for the description of data availabilities which did not belong with any particular program. The following lists the program sections in the Compendium:

- A. School Assistance in Federally Affected Areas Program
- B. Management of General State Grants Program
- C. School Food Services
- D. Transportation Grants Administration Program
- E. School Library Program
- F. Compensatory Education Program
- G. Migrant Program
- H. Driver Education Program.
- I. ESEA Title III Grant Management Program
- J. Special Education Program
- K. Adult Basic Education
- L. NDEA Title III-A Program
- M. Vocational Education Services Program
- N. Drug Abuse Program
- O. Bilingual Education Program
- P. Education Professions Development Program
- Q. General Statistics

Data Categorization

The data types were extracted from the Connecticut forms first and listed in the Data Type Column. The form and item numbers were then noted*. The data types were then compared with the Colorado data and were classified as to being identical or different. After the listing for Connecticut was complete the Colorado data types that were not already



^{*} If the form or item did not have a number "No Form No." or "No Item No." was written in this column. The absence of any notation whatsoever (blank) in any form and item column indicates that that data type is unavailable in that State or the F/SS instruments.

used in comparison with the Connecticut data types were listed. All data elements were then compared to the Federal/State Data System data elements and classified accordingly.

The method of categorization of data types into identical and different categories needs some additional explanation. For example, there are four possible ways for a data type to be identical: (1) Connecticut and Colorado, (2) Connecticut and Federal/State Data System, (3) Colorado and Federal/State Data System, and (4) Connecticut and Colorado and Federal/ State Data System. These four combinations are also possible in each of the three sub-categories of data difference, i.e., (1) by source or level of collection; (2) by time of collection, and, (3) by category breakout. In addition, it is possible for a data type to be identical across Connecticut and Colorado and for both to be different from the Federal/State Data System by, say, source or level of data collection. This means that in many cases a particular data type will have more than one category column filled in. When this occurs, a careful reading of the column contents should make these data relationships clear.

The column headings and the basic usage in development of this tabular presentation are as follows:

Column Names

- 1. Data Type
- 2.a. Connecticut Form and Item;b. Colorado Form and Item
- 3. Federal/State Variable
- 4. Identical
- 5. Different
 (a) Source or Level

Usage

Brief Description of the information requested by the form, and the form title, when applicable.

Form and item number serves to locate the data types.

F/SS form and item numbers serves to locate the data types.

This column uses abbreviated State names or F/SS to indicate that the data type is identical across the specified States and/or F/SS instruments.

This column uses abbreviated State names or F/SS to indicate that the data type differs only in the level at which it is collected, e.g., SEA vs. LEA, or in the source from which it is collected, e.g., sponsoring agency vs. school district.

Column Names

Usage

(b) Time Collection

This column refers to broad differences in time of collection as indicated by the type of form, e.g., Application vs. Final Report.

(c) Category Breakout

This column refers to differences in the way in which a particular data type is divided into categories, e.g., grade level vs. grade span.

Under the data type column asterisk, have been assigned to those information items which have been used in support of analysis statements in SDAP-Model I in Part II

DATA COMPENDIUM

The tables follow in the order of the program areas listed above. Numbering of tables is by the letter shown above and pages within each program set.



COMPLIANCE MANAGEMENT - NO STATE FLAN

SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS PROGRAM

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PROGRAM School Assistance in Federally Affected Areas

		Remarks						F/SS total membership only			
•		Category						F/SS Conn Colo			
	Different	Time of Collection						-			
4 (1)	F-4	Source or Level						F/SS Conn Colo (PCI-Pr)			
4		Identical	Conn Colo	Conn Colo	Conn Cclo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
	Federal,	State Variable						CPIR, IA ESS-Pr, Q7			
		Colo Form & Item	OE 4017-1	P. 1	P• 1	p. 1	Table I	Table II	Table II	Table II	Table .:
	•	Conn Form & Item Form	, OE 4017-1	p. 1	p• 1	p. 1	Table I	Table II	Table II	Tuble II	Table II
		Data Type	APPLICATION FOR FINANCIAL ASSISTANCE FOR PUBLIC SCHOOL CONSTRUCTION - PART I LEA	I. Maximum Grant	A. J.D. Data	B. Certification	C. School districts affected by reorganization since last application or within four year increase period	D. School attendance and membership data for base year and 4-year increase	(1) School year by average daily attendance by average daily membership by grade levels	(2) Estimated membership end of first yr. following increase	(3) Estimated membership close of 2nd year following increase

PROGRAM School Assistance in Federally Affected Areas

		Remarks									
		Category Breakout									
	Different	Time of Collection									
A (2)		Source or Level									·
4			Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
	Fodens1/	. 0)									
			OE 4017-1	Table III	Table III	Table IV	Table IV	Table V	Table V	Table VI	Table VIA
		Conn Colo	OE 4017-1	Table III	Table III	Table IV	Table IV	Table V	Table V e	Table VI	Table VIA
		Data Type	APPLICATION FOR FINANCIAL ASSISTANCE FCR PUBLIC SCHOOL CONSTRUCTION - PART I (Cont.)	E. Family Housing under construction or to be constructed	(1) Project Name by ownership (Federal or Non-Federal) by No. of units	F. Buildings used for school purposes	(1) Name by grades, by classrooms rated for capa- city by project numbers by total	G. School Buildings to be available	(1) Name by grades by Table V classrooms by date of contract by project no. by total	* H. Federal Properties	(1) Federal property excluding low rent housing projects

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PROGRAM School Assistance in Federally Affected Areas

		•						
		Remark						· .
		Category Breakout						•
	Different	Time of Collection						
A (3)		Source or Level					•	
₽ P		Identical	Conn Colo	conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
	Federal/	41						
		Colo Form & Item	OE 4017-1	Table VIB	Table VII	Table VIIA	Table VIIB	Table VIIC
		Conn . Form & Item Form	, OE 4017-1	Table VIB	Table VII	Table VIIA	Table VIIB	Table VIIC
		Data Type	APPLICATION FOR FINANCIAL OE 4017-1 ASSISTANCE FOR PUBLIC SCHOOL CONSTRUCTION - PART I (Cont.)	(2) Lc. Kent Housing property; name, location and no. of units	*I. Federally connected membership	*(1) Federal Property on which pupils reside with parent employed on Federal program; by member- ship and totals (subsection 5(a)(1)	*(2) Pupils residing on Table VIIB Federal property or with parent employed on Federal property other than Low Rent Housing Properties by member- ship and totals (subsection 5(a)(2)	*(3) Pupils residing on Table VIIC or residing with parent employed on Low Rent Housing Property by membership and totals (cubsection 5(a)2)

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PROGRAM School Assistance in Federally Affected Areas

A (4)

Data Type Conn									
Comn & State Source				Federal/		A	Different		
Table VIII Table VIII Com Colo Table XI Table XI Com Colo		Conn	Co.	State	Tdontinol	Source	Time of	Category	
Table VIID Table VIID Table VIII Table VIII Table IX Table IX Table X Table X Table XI Table XI Table XI Table XI Table XI Table XI Table XIIA Table XIIA	N FOR FINANCIAL E FOR PUBLIC NSTRUCTION -	, OE 4017-1	OE 40		Conn Colo				0 4 751104
or Table VIII Table VIII ent Table IX Table IX ttend- dis-Table X Table X ident hip of Table XI Table XI rable XI Table XI tions Table XIIA Table XIIA ts, tions	ਬਰ ਦ	Table V!ID	Table VIID		Conn Colo				
ent Table IX Table IX ttend- dis-Table X ident hip of Table XI Table XI Table XI Table XI ts, tions	for	Table VIII			Conn Colo				
dis-Table X Table X ident hip of Table XI Table XI hip eded ts, tions		Table IX			Conn Colo				
Table XI Table XI eded Table XIIA Table XIIA tions tions	ent pupils attenther school distornon-residents by membership ory by name of	id- Table X it			Conn Colo				
Table XIIA Table XIIA	hip	Table XI			Conn Colo				
		Table XIIA			Conn Colo				

Commenced Residential Residential

PROGRAM School Assistance in Federally Affected Areas A (5)

	Category	Breakout Remarks				·				F/SS total membership Conn Colo
Di Ffeener +	3	COTTECTION								
		or rever								F/SS Conn Colo (PCI-Pr)
	**************************************	"	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
	State	_								CPIR, IA ESS-Pr, Q7
	Colo Form & Item	5	. 401/-1	Table XIIB		Table XIIIA	Table XIIIB	Table XIIIC		Table XIVA
	Conn Form & Item	OF 4017_1	401/-1	Table XIIB		n: Table ng XIIIA nn	le XIIIB	Table XIIIC Table XIIIC		Table XIVA
	Data Type	APPLICATION FOR FINANCIAL	ASSISTANCE FOR PUBLIC SCHOOL CONSTRUCTION - PART I (Cont.)	0. Funds available for school construction	*P. Pupils residing on Indian lands (subsection l ^u (a) or l ^u (b))	*(1) School age children: Table membership by living XIIIA on/living off Indian lands by total	(2) Funds to provide Tab facilities for un-housed children and living on Indian lands; cost, available funds, Federal funds needed by amount	(3) Number of square T miles of Indian and/or Federal lands within applicant school district	<pre>0. Application for administrative monies (subsection 14(c)</pre>	(1) Membership data as of survey; increase period; close of second year

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PROGRAM School Assistance in Fed. ally Affected Areas

A (6)

			Fodom 1 /		A A	Different		
	Conn	Colo	State		Source	Time of	Category	
Data Type	Form & Item	Form & Item	Variable	Identical		Collection	Breakout	Remarks
APPLICATION FOR FINANCIAL ASSISTANCE FOR PUBLIC SCHOOL CONSTRUCTION - PART I (Cont.)	, OE 4017-1	OE 4017-1		Conn Colo				
(2) Capacity of available facilities	Table XIVA s	Table XIVA		Conn Colo				
(3) Funds; cost of facilities for housing available funds and total	Table XIVB -	Table XIVB		Conn Colo				
(4) Federal funds . needed	Table XIVB	Table XIVB		Conn Colo				
(5) Number and percent Table XIVC of square miles of Federal lands within district	Table XIVC	Table XIVC		Conn Colo				
APPLICATION FOR FINANCIAL OE 4017-2 ASSISTANCE FOR PUBLIC SCHOOL CONSTRUCTION -	D OE 4017-2	OE 4017-2		Conn Colo				
I. Project Assistance	р• 1	p. 1		Conn Colo				
A. I.D. Data	р• 1	р• 1		Conn Colo				
B. Amount requested	p. 1	р• 1		Conn Colo				
C. Certification	р. 1	р• 1		Conn Colo				
D. Resolution	p. 2	p. 2		Conn Colo				
(1) Description of facility	p. 2	ъ• 2		Conn Colo				
(2) Signature	p. 2	p. 2		Conn C 10				

Total Stand

PRUGRAM School Assistance in Federally Affected Areas

		Remarks										-	
		Category Breakout		_									
	Different	Time of Collection											
		Source or Level											
A (7)		Identical	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
	Federal/												
		Colo Form & Item	OE 4017-2	p. 2	p. 2	P. 2	P. 2	ъ.	ъ. ф.	# • Ci	٠ د	Table A	Table B
		Conn Form & Item Form	OE 4017-2	p. 2	p. 2	p. 2	p. 2	ъ. Э.	b. 4	ъ. ф	ъ. S	; Table A p- d,	Table B
		Data Type	APPLICATION FOR FINANCIAL OF 4017-2 ASSISTANCE FOR PUBLIC SCHOOL CONSTRUCTION - PART II (Cont.)	(3) Cost	(4) Amount of Federal funds	(5) Amount of local funds	(6) Signature of representative	E. Certificate of Recording Officer	F. Assurances (signature)	G. Certification of State Educational Agency	H. Applicants for Impacted Areas Assistance ONLY	(1) Proposed facilities; Table square feet; description, contract award, and architect	*(2) Number of pupils to be housed in proposed facilities by grades by total

PROGRAM School Assistance in Federally Affected Areas A(8)

			Federal/	• <u> </u>	Ω	Different		
Data Type	Conn Form & Item	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
FINANCIA PUBLIC TION -	OE 4017-2	OE 4017-2		Conn Colo				
(3) Kindergarten on double-session basis	Table B	Table B		Conn Colo				
	Table B	Table B.		Conn Colo				
Site data (cost, title, improvement, size, and location)	Table C	Table C		Conn Colo				
Financial data (comout of proposed facilities and plan of financing and total)	Table D	. Table D		Conn Colo				-
(7) Financial Ability of Applicant (subsection 5(a)3,8,9, 14, and some of Section 5	Table E	Table E		Conn Colo				·
(A) Applicant can or cannot pay portion of proposed facilities	Table E	Table E		Conn Colo				
Source and amount of non-Federal funds, total	Table E	Table E		Conn Colo				
Other financial data	Table E	Table E		Conn Colo				

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PROGRAM School Assistance in Federally Affected Areas

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			Fedens /		Q	Different			
	Conn	Colo Form & Item		Identical (Source or Level	Time of Collection	Category Breakout	Remarks	
APPLICATION FOR SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS	OE 4019			T -					1
1. I.D. Data	p. 1	р. 1.		Conn Colo					
2. Assurance	p. 1	p. 1		Conn Colo					
3. Certification	p. 1	p. 1		Conn Colo					
*u, Pupils Residing on Federal Properties (all applicants except those under Section 2 and 4 contract-type)	Table 1	Table l		Conn Colo					
* A. Name and location of Tal federal property by State by number of pupils with parent employed or Federal property or with parent not employed on Federal property and totals	f Table l	Table 1		Conn Colo					
* 5. Pupils whose parents are employed on Federal properties or in active duty in services (all applicants except those under Section 2 and 4 contract-type)	Table 2	Table 2		Conn Colo					
A. Name and address of service by State by number of pupils whose parents do or do not reside on federal property and totals	Table 2	Table 2		Conn Colo					

PROGRAM School Assistance in Federally Affected Areas A (10)

_						-	•				
	Remarke	OK TOILS	F/SS total membership only								
	Category		F/SS Conn Colo								
Different	Time of Collection										
	Source or Level		F/SS Conn Colo (PCI-Pr)								
	Identical	Conn Colo	Conn Colo	Conn Colo		Conn Colo		Conn Colo enter on side	Conn Colo		
Federal/	State Variable		CPIR, IA ESS -Pr, Q7								
	_	OE 4019	Table 3	Table 3		Table 3		Table 4 and 4 applicants)	Table 4 (1)		,
	Conn Corm & Co.	OE 4019	Table 3	Table 3 y-	lance	Table 3		Table 4 (Section 3 a	Table 4 (1) Table 4		
	Data Type	APPLICATION FOR SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS (Cont.)	*6. Average daily attendance and membership for all categories of pupils	*A. Pupils category (Federal property and activities employ ment and residence) by Preceding Year	average daily attendance by number of pupils and average daily attendance as of membership survey	B. Election of entitle-Table ment increase under Subsection 4a only when substantial	increase in ADA of federally connected pupils	7. Rate requested for payment	mpar- :s, . contri	which is the greater of 1 or 2 following:	

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PROGRAM <u>School Assistance in Federally Affe</u>cted Areas A(11)

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	Rem arks									•	
	Category Breakout										
Different	Time of Collection										
	Source or Level										
	Identical	Conn Colo	Conn Colo		Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
Federal/						~					
	Colo Form & Item	OE 4019	Table 4(la)	Table 4(1b)	Table 4(2)	Table 4(2,a)Table 4(2,b	Table 4(2c)	Table 4(3)	Table 5	Table 5(1)
-	Conn Form & Item Form	OE 4019	Table 4(la) Table 4(la)	Table 4(lb) Table	Table 4(2)	Table 4(2,a)Table 4(2,a)	Table 4(2,b)Table 4(2,b	r Table), 4(2c)	ed Table 14(3)	Table 5	Table 5(1)
		APPLICATION FOR SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS (Cont.)	(1) Amount = to 50% average per pupil expenditure in State for second year preceding	(2) Amount = to 50% T national average per pupil cost for second year preceding	B. Comparable school districts, based on State groupings	(1) Group to which applicant belongs	(2) Local contribution rate by group, second year preceding	(3) Current expense per pupil cost for group, second year preceding	C. Individually selected comparable districts	8. Fiscal Report for payment	A. Cash on hand at the Table 5(1) beginning of the year by amount preceding year and current year

PROGRAM School Assistance in Federally Affected Areas

Remarks | Source | Time of | Category Identical | Or Level | Collection | Breakout Different A (12) Conn Colo Form & Item Form & Item Variable State Federal/ Table 5(3) Table 5(4) Table 5(5) Table 5(5) Table 5(6) Table 5 (2 a-f) Colo OE 4019 Table 6 Table 5(3) Table 5(4) Table 5(6) OE 4019 Table 5 (2 a-f) Conn Table 6 preceding and current Cash on hand at close preceding and current Receipts for current Total current expen+ Individually selected ASSISTANCE IN FEDERALLY year preceding for applicants under 384 provided by Federal district data-second able by amount pre-Total funds avail-(local, State, Federal) by amount Value of transporgovernment without preceding and curceding and current tation, custodial, district by amount of year by amount AFFECTED AREAS (Cont.) APPLICATION FOR SCHOOL or other services diture by amount reimbursement by comparable school exbense burbose preceding and current year Data Type rent year year year year æ, Ġ. Ŀ, ပံ щ . 6

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PROGRAM School Assistance in Federally Affected Areas
A (13)

	Remarks				F/SS membership and grade levels
	Category Breakout				F/SS Conn Colo
Different	Time of Collection				
	Source or Level				F/SS Conn Colo
	Identical	Conn Colo	Conn Colo	Conn Colo	Conn Colo
Federal/	State Variable				ESS-Pr, Qla ESS-Pr, Q7
	Form	OE 4019	Table 6 (1A-8)	Table 6 (18-16)	Table 7
	Conn Form & Item	OE 4019	Table 6 (1A-8)	Table 6 (18-16)	Table 7
	Data Type	APPLICATION FOR SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS (Cont.)	A. School districts (total in State, name of comparable districts, total quotient, applicant district second year preceding) by ADA by revenue receipts by current expenses by local contribution rate by per pupil cost	B. Comparable school districts and applicant district second year preceding and current year by legal classification by pupiteacher data, by assessed valuation by school tax rate	10. Current year individ-Table 7 ually selected comparable school district data for applicants under subsection 3(a) (4) and 4 (comparable districts, total, and applicant district by estimated ADA, grade level, pupil teacher ratio, by assessed valuation by school

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PROGRAM School Assistance in Federally Affected Areas A(14)

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		Remarks									
		Category Breakout									
	Different	Time of Collection									
	Δ	Source or Level									
¥		Identical	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo
	Federal/	State Variable									
		Colo Form & Item	OE 4019	Table 8	Table 8	Table 8(1)	Table 8(2)	Table 8(3)	Table 8(4)	Table 8(5)	Table 8(6)
		Conn Form & Item	OE 4019	Table 8	Table 8	Table 8(1)	. Table 8(2)	Table 8(3)	Table 8(4)	Table 8(5)	Table 8(6)
		Data Type	APPLICATION FOR SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS (Cont.)	11. Financial burden and effort data (applicants under subsection 3(c)(4) and 2 and 4	A. Fiscal year by total enrollment by total ADA by grade levels by current expenses by assessed valuation by school tax rate	B. Average tax rate in comparable school districts	C. Average total school tax rate	D. Percent of true value compared with average in comparate able districts	E. Legal maximum rate	F. Reason for valua- tion change	G. Amount of current expense transferred for school construction by current and preceding year

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PROGRAM School Assistance in Federally Affected Areas

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		,	Federal/	1	Α	Different			
	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks	
APPLICATION FOR SCHOOL ASSISTANCE IN FEDERALLY AFFECTED AREAS (Cont.)	OE 4019	OE 4019		Conn Colo					т ——
H. Amount of receipts by current and preceding year	Table 8 (7 a,b)	Table 8 (7 a,b)		Conn Colo					
I. Average number of pupils per teacher by level by current and preceding year	Table 8(8)	Table 8(8)		Conn Colo					
J. Half-day sessions	Table 8(9)	Table 8(9)		Conn Colo					
K. Teacher salary by current and preced- ing year	Table 8(10)	Table 8(10)		Conn Colo					
L. Are there deficiencies in program due to Tal lack of funds	ies Table 8(11)	Table 8(11)		Conn Colo					
Eligible Federal activities by number	Table 9	Table 9		Conn Colo		,			
and average daily attendance of in- migranted pupils (applicants under subsection #(a)					_				
Federally owned property acquired since 1938 (applicants under Section 2)	Table 10	Table 10		Conn Colo					
A. Property Location data	Table 10(A)	Table 10(A)		Conn Colo					
B. Acquisition data	Table 10(B)	Table 10(F)		Conn Colo					

PROGRAM School Assistance in Federally Affected Areas A (16)

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Form & Item Form & Item Variable Identical
OE 4019 Conn Colo
Table 10(C) Table 10(C) Conr Colo
School district data Table 10(D) Table 10(D) Conn Colo
Substantiating data Table 10(E) Table 10(E) Conn Colo
OE 4037 Conn Colo
p. 1 Conn Colo
p. 1 Conn Colo
p. 1 Conn Colo
p. 1 ESS-Pr, Conn ?7 CPIR-IA
p. 1 Conn Colo
Table 1 Conn Colo

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PROGRAM School Assistance in Federally Affected Areas A(17)

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Form & Item Form		S Item	a)	Identical	7	Collection	category Breakout	Remarks
OE 4037		OE 4037		Conn Colo				
Table 1		Table 1		Conn Colo				
Table 2		Table 2		Conn Colo				
count) . for nots 3,		Table 3A	ESS-Pr, Q7 CPIR-IA	Çonn Colo	F/SS Conn Colo (PCI-Pr)		F/SS Conn Colo	F/SS total membership only
Table 3B		Table 3B		Conn Colo				

PROGRAM School Assistance in Federally Affected Areas A (18)

				(S) \ 4				
			Federal/			Different		
	Conn Colo		State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
REPORT FOR DETERMINING FINAL PAYMENT PURSUANT TO TITLE I OF P.L. 81-874 (Cont.)	OE 4037	OE 4037						
8. Fiscal Report for payment (applicants under Section 2,3(c) (4) and 4(a)	Table 4	Table 4		Conn Colo				
A. Amount of cash on hand	Table 4(1)	Table 4(1)		Conn Colo				
B. Receipts for current expenditure purpose by final amount	Table 4	Table 4 (2 a-f)		Conn Colo		•		,
C. Total funds available	Table 4(3)	Table 4(3)		Conn Colo				
* D. Total current expenditures	Table 4(4)	Table 4(4)		Conn Colo	+			
E. Actual cash at close of year	Table 4(5)	Table 4(5)		Conn Colo				·
STATE EDUCATIONAL AGENCY OR REPORT OF MINIMUM REQUIREMENTS FOR SCHOOL CONSTRUCTION	E 4038-1	OE 4038-1		Conn Colo				
l. School organization (level) by grades by normal capacity per class room (regular and special)	No Item No.	No Item No.		Conn Colo				
2. State summary of con-No Item No. No Item No. tracts awarded	No Item No.	No Item No.		Conn Colo	-			

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PROGRAM School Assistance in Federally Affected Areas A (19)

Data Type Conn Colo State State Conn Colo State State Conn Colo State Conn Colo State Conn Colo State Conn Colo Co		1			-	•			
Common Colo State Common Colo Common Colo				Federal/		a	rrerent		
No Item No. No Item No. Conn Colo		g	Colo			_	Time of	Category	
OE 4038-1 OE 4038-1 Conn Colo A A Conn Colo B B Conn Colo No Item No. No Item No. Conn Colo No Item No. No Item No. Conn Colo A A Conn Colo		Item	Form & Item			_	Collection	Breakout	Remarks
rial A A Conn Colo gs.etc f		OE 4038-1	OE 4038-1		Conn Colo				
f. b B Conn Colo date C Conn Colo date No Item No. No Item No. Conn Colo 0E 4038 0E 4038 Conn Colo No Item No. No Item No. Conn Colo mal A A mal A A mal A A cet of A A cet of A A cet of A A cet of A A conn Colo Conn Colo cet of A A	material n require- public ildings,etc	ď	∢		Conn Colo				
date No Item No. No Item No. Conn Colo OE 4038 OE 4038 Conn Colo No Item No. No Item No. Conn Colo A A A Conn Colo ass- ar, eet of A A A Conn Colo ct A A A Conn Colo	hod of capacity	щ	щ		Conn Colo		-		·
date No Item No. No Item No. Conn Colo 0E 403B 0E 403B Conn Colo No Item No. No Item No. Conn Colo mal A A ass-ar, A Conn Colo eet of A A ties A A ct A A		υ	υ		Conn Colo				
No Item No. OE 4038 Conn Colo Mal A A Conn Colo ass-ar, A A Conn Colo eet of A A Conn Colo ties A A Conn Colo ct A A Conn Colo ct A A A	and date		No		Conn Colo				
chool A A Conn Colo used A A A d normal A A Conn Colo of class-regular, and ten A A Conn Colo are feet of A A A acilities A A A ontract A A A	TRACT		ਕ .		Conn Colo				
A A Conn Colo t of A A A Conn Colo t of A A A Conn Colo		No Item No.	No Item No.		Conn Colo		_		
L of A A Conn Colo t of A A Conn Colo t of A A Conn Colo A A A Conn Colo	chool	V	A		Conn Colo			_	
t of A A Conn Colo Conn Colo Conn Colo A A A Conn Colo	nsed	Ą	V		Conn Colo				
t of A A Conn Colo es A A Conn Colo A A A Conn Colo	d normal of class- regular, and	V	4		Conn Colo				
es A Conn Colo A A Conn Colo			ď		Conn Colo		-		
A	acilities	Ψ.	Ą		Conn Colo			,	
	ontract	¥	¥		Conn Colo				

PROGRAM School Assistance in Federally Affected Areas A (20)

r		- 1				
	Remarks					
	Category Breakout					·
Different	Time of					
	Source or Level			0		
ļ	Identical		Conn Colo	Conn Colo	Conn Colo	Conn Colo
Ferenal/	o State Item Variable					
	Colo Form & Item	OE 4038	ф	"m	O	No Item No.
	Conn Coll	OE 4038		æ	U	No Item No.
	Data Type	REPORT OF CONTRACT AWARDED	8. Cost of sciol plant	9. Cost of contract, legal, architect, furniture and on site improvement	10. Rema rk s	11. Certification and date

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MANAGEMENT OF GENERAL STATE GRANTS PROGRAM

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PROGRAM Management of General State Grants B (1)

		Remarks	Conn. by specific levels and minutes - F/SS, no.days only, hrs.per day.	Colo. more general (average daily membership or average daily attendance for 4 week period to determine eligibility rates)				CDE 123 - essentially same as CDE 18 but at BOCS level.	Conn end of year; cost by level of grade. by summer school by non-mem- bership expenses. Colo offers compari-
		Category Breakout	Conn. Colo. C F/SS	5	F/SS				<u> </u>
	Different	Time of Collection	-					Colo.123 Conn.Colo. Conn.Colo.	
		Source or Level	F/SS					Colo.12	
		Identical		300000					
	Federal/		ESS - D1, Q2 A ESS -Pr, Q 2 A		CPIR, IA				
		Colo Form & Item	CDE 20 (1, 2)					CDE 123 CDE 18 P. 12	
*		Conn Conn Form 8	ED 001 Table I p. 3		Table II p. 3	Table IIIA p. 3	Table IIIB p. 3		
		Data Type	END OF YEAR SCHOOL REPORT ED 001 ID Information *1. Regular year data for Table local schools (no. of p. 3 days and minutes/day by level)		<pre>2. Free Summer School pupil data (attendance, etc., by resident and non-resident)</pre>	3. Non-resident attendance at summer school	4. Resident pupils/free summer/another district	*5. Public school current Table IV expenses for year end	

			Federal/			Different		
Data Type	Conn Corn Co. Form &	Colo Form & Item	State Variable	Source Identical or Level	Source or Level	Time of Collection	Category Breakout	Remarks
END OF YEAR SCHOOL REPORT	ED 001							also not by level of education nor by summer school nor by nonmembership expenses; but categories much
*5A. General control	Table IV p. 4	CDE 18 p. 12 (1-5)					Conn. Colo.	more specific.
* B. Instruction	p. 4	(6-19)	CPIR, IVB1 CPIR, IIIA 1-8				F/SS Conn.Colo.	
* C. Attendance and Health Service	p. 4	(20-27)	CPIR, IIIA 1-8				Conn.Colo. F/SS	
* D. Pupil Transportation	p. 4	(28-35)		,	_		Conn.Colo. F/SS	•
E. Operation- Maintenance of Plant	ņ. S	p. 13 (1-14)	CPIR, IIIA 1-8				F/SS Conn.Colo.	
F. Fixed charges	p. 5	p. 13 (15-32)	CPIR, IIIA				Conn.Colo.	Colorado more specific by item for expense.
G. Outgoing accounts	č.	p. 14 (15-27)	CPIR, IIIA				Conn. Colo	Colo Colorado - no distinc- tion made for public versus non-public schools as done by Connecticut.
*H. Total current expenses	ę. S	p. 14 (13)	CPIR, IIIA 1-8				F/SS Conn. Colo.	Colorado includes capital outlay in the figure and community services but excludes outgoing transfers.

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PROGRAM Management of General State Grants

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			Fodonal/		Ω	Different		
bata Type	Conn Col Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
END OF YEAR SCHOOL REPORT (Cont.)	ED 001							
51. Breakdown of Expenses by source of funds	Table IV p. 5	CDE 18	•				Conn.Colo.	Colorado form much more specific.
(1) Federal	٠. م	p.17-18 p.19 (1-35) (9)		٠				
*(2) State	٠ •	p.16 p.19 (15-27) (8)	CPIR, IVB1 CPIR, III 1-8				F/SS .	
(3) Local (non-tax)	p. 5	p.19 (5)						
(4) Incoming transfers	s e	p.19 (17-21)						
(5) Local tax revenues	٠ د د	p.16 (1-7)						·
(6) County revenue	٠ <u>٠</u>	p.16 p.19 (9-13)						
6. Revenue for school support (1 year)	ED 001	CDE 18					Conn.Colo.	-
A. Local sources	Table V	p. 16 (1-7)	·					
B. Incoming transfers	Table V	p. 19 (17-21)						
C. School districts in other states	Table V							
				· ••				
	_		_	_	_			

E	Conn	l g	Federal/ State	\sim	Source	Different Time of	Category		
Data Type END OF YEAR SCHOOL REFL.(Cont.)	Form & Item Form	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks	
Community service, capital outlay, school debt	ЕD 001	CDE 18							
A. Community service	Table VI	p. 13 (33-39)		-			Conn. Colo.	Conn. and Colo. in- clude different items in this category.	
B. Capital outlay	Table VI	p. 14 (1-5)	CPIR, IIIA	F/SS			F/SS Conn.Colo.	Conn. includes breakdown by Special Education and total day and free summer school.	
G. De bt services	Table VI	p. 14 (7-11)	CPIR, IIIA 1-8	F/SS			F/SS Conn.Colo.	Conn. by town and regional schools.	
Outstanding indebt- edness - value of school property	Table VII				_				
Supplement - Population in schools in session more or less tl a 180 days - by level by no. of days.	ED 001		CPIR, IA				F/SS, Conn.		
SCHOOL STAFF REPORT (Specific individual data on teachers)	ED 004		ESS-Te, Q23 ESS-Te, Q24 ESS-Te, Q26 ESS-Te, Q29a, b ESS-Te, Q31		F/SS F/SS F/SS F/SS		F/SS F/SS F/SS		
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PROGRAM Management of General State Grants B (5)

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,			Federal/		a i	Different		
Data Type	Conn Form & Item Form	Colo Form & Item	4)	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
FALL SCHOOL REPORT	ED 006							
1. Name of agency operating summer school plus current expenditures and receipts	(1-3)							
2. Days, teachers, pupils by free and paid	(4-6)							
3. Free summer school by course, by no. of classes, by teacher salary	(2)							
4. Paid summer school data	(8)							
5. No. of June high school grads	Table II	_						
6. Post high activity by scx by location of graduates (in- cluding education)	Table II	<u>.</u>						
7. Transportation to and/or from school	Table III							
* A. Kind and no. of vehicles	Table III							
B. Kind of vehicle by aggregate no. of miles	Table III							

PROGRAM Management of General State Grants B (6)

		gory cout Remarks				F/SS, class size only							
	Different	Time of Category Collection Breakout				_	SS/tỷ						
	D	Source or Level				F/SS, Com	F/SS						
(a)		e Identical	_										 _
	Federal/					ESS-Te, Q3	ESS-Te, Q45,48						
		Colo Form & Item											
		Conn Conn Co	Table III	Table III	Table III	Table IV	Table V		Table VI (1)	Table VI (2)	Table VI (3)	Table VI (4)	
		Data Type	7C. Kind of vehicles by cost	D. Kind by no. of pupils by level	* E. Non-public trans- portation	8. No. of classes by class size	9. Data on teachers - education by level by experience	10. School Libraries	A. No. of libraries by level	B. No. of volumes	C. Library teachers, free summer school	D. Non-certified personnel	

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PROGRAM Management of General State Grants B(7)

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			Federal/			Different		
Data Type	Conn Coln Form & Item	Colo Form & Item	Stat e Variable	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
ENUMERATION OF CHILDREN	ED 016	CDE 2						
*1. Total no. of children	p. 1	(1)	CPIR, IA				Conn.Colo.	F/SS - no age break-
by age (0-20) in public, non-public, institutions, nost-		•					F/SS	out; non-public, public only and total
secondary, or not in								Colorado tells only
								by grade in public schools - not age
								nor other institu- tions.
2. Non-attending children of compulsory school age and reason	p. 2							
for non-attendance								
PUPIL DATA REPORT	ED 054B ED 054A	CDE 2						Conn.ED 054A(Oct) and ED 054B (May) are
								identical except for time of collection;
		1						Colorado form presents annual aggregate data
*!. Pupils enrolled full- time by grade by resident vs.non-	Table IA	(5)	CPIR, IA			·	Conn.Colo. F/SS	Conn.Colo. F/SS - No resident, F/SS non-resident; total only.
								Colorado lists pupils by grade by sex but no distinction between resident and non-resident.
 Full-time pupils <pre>(absent and present on Oct. 1)</pre> 	Table IB	_	ESS-Pr, Q7				F/SS Conn.	
				-				

PROGRAM Management of General State Grants B (8)

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			Federal/		1	Different		
Data Type	Conn Corn Form &	lo Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PUPIL DATA REPORT	ED 054B ED 054A	CDE 2						
*3. No. of pupils by sex Table IC	Table IC	(2)				Conn.Colo.		
*4. No. of pupils by school level	Table ID	. (2)				Conn.Colo.	Conn.Colo.	Colorado lists total by grade, not level; must interpolate to compare to Conn., but can be done.
5. No. of non-resident pupils by program totals	Table II			٠.			Conn.Colo.	Colorado deals only with average daily attendance, not no. and type of program
Resident pupils sent out	Table III	CDE 20						
7. Free summer school pupil data (attendance by resident and non-resident) and total	Tables IV, v, vI		CPIR, IA				F/SS, Conn.	
8. No. of pupils in tax-exempt state property by Special Education and other	Table VII							
9. Vocational Agriculture students (resident and non-resident by grade)	Table VIII							

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PROGRAM Management of General State Grants B (9)

		Rem a:'ks		all spec. ed. pupils together. Colorado.refers to specific program for disadvantaged and	handicapped. These may or may not be comparable.										
		Category Breakout				Conn.Colo.				_					
	Different	Time of Collection											-		
		Source or Level													
(2) (1		Identical													
	Federal/	-													
		Colo Form & Item	CDE 18			р. 33 (н)		CDE 2 (2)							
		Conn Form & Item Form &	ED 040			(A-J)	(K-N)	(0-T)	(n-x)	(Y-FF)	(v)	ED 040 A	ED 011		
		Data Type	SPECIAL EDUCATION GRANT			1. Eligible expenses	2. Srecial Education income	3. Eligible Special Education pupils	4. No. paying pupils	5. Per-pupil cost for non-paying children	* 6. Computation of grant	7. Bus purchase (Supplement)	•		

PROGRAM Management of General State Grants $\beta(10)$

	Remarks		Colorado form for special contingencies making State grant money possible	Only Colorado has specific aid to schools in rural areas not close to other schools. Connecticut aid is flat rate; Colorado is more flexible.
	Category Breakout			
Different	Time of Collection			
Д	Source or Level			
	Identical			
Federal/	41			
	Colo Form & Item		CDE 21	CDE 20 pp. 5-8
	Conn Corn Form &	ED 017		
	Data Type	OUT OF SCHOOL YOUTH EMPLOYMENT DATA (Grads and non-grads and activities)	*SUPPLEMENTAL ASSISTANCE FOR SPECIAL CIRCUMSTANCES (Average daily attendance and name of pupil by court or agency making referral by grade level by average daily member- ship or average daily attendance	ELEMENTARY AND SECONDARY SMALL ATTENDANCE CENTER *ID Information (See items on End-of- Year Report, above)

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SCHOOL FOOD SERVICES PROGRAM

Comn Colo Conn Colo Collection Breakout Remarks		Conn	Colo	Federal/ State		Source	Different Time of	Category	
School	9	Form & Item	Form & Item				Sollection	category Breakout	Remarks
No Item No. No Item No. Conn Colo	OF SCHOOL AST AND NOW CE OPERATION	FNS-10 - NS	FNS-10		Conn Colo				
Process	<u> </u>	No Item No.			Conn Colo				
Tree or (4) (4) (4) Conn	ogram by schools or partici- mber of porting, AD mber of mea Federal	, vi		Qlc				F/SS Conn Colo	F/SS number of schools participating
GRAM FNS-28 FNS-28 Conn Program No Item No. No Item No. Conn tlets participa- of clained er of milk, eral by Juby summer	er of or free or ice lunches	(†)	(‡)		Conn Colo		-		
GRAM GRAM No Item No. No Item No. Conn tlets participa- of clained er of milk, eral by summer	c	No Item No.			Conn Colo				
No Item No. No Item No. Conn ipa- ined	OF PROGRAM	FNS-28	FNS-28		Conn Colo	<u>-</u>	_		
ined (1-4) (1-4) Conn	<u>~</u>	No Item No.			Conn Colo				
	lk Program outlets or particip or of claim nuber of of milk, ederal out by ild care is, summer	(1-4) ad	(1-4)		Conn Colo				

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PROGRAM School Food Services
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e e	Form & Item Form &	Form & Item	ψ		7	Collection	Breakout	Remarks
MONTHLY REPORT OF SPECIAL MILK PROGRAM (Cont.)	FNS-28	FNS-28		Conn Colo				
Number of schools approved for participating in special assistance milk programs	(5)	(5)		Conn Colo				
Number of schools for which claims were submitted for this month	(9)	(9)		Conn Colo				
Average daily number of children receiving free milk	. (2)	(7)		Conn Colo				
Half-pints of milk by Inumber served including those served free and number served free	(8 a,b) -	(8 a,b)		Conn Colo				
Amount of federal reimbursement required of all claims (including free milk and free milk only)	(9 a,b)	(9 a,b)		Conn Colo				·
Signature of certification	No Item No.	No Item No.		Conn Colo				
MONTHLY REPORT OF SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN	FNS-44	FNS-44		Conn Colo				
1. I.D. data	No Item No.	No Item No.		Conn Colo				
Total number of service institutions approved for participation	(l a)	(la)	888-Di, Qic	Conn Colo			r/SS Conn Colo	F/SS number of schools participating

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		-	Federal/	1	Ö	Different		
· •	Conn	Colo	State		Source	Time of	Category	
Data Type	orm & Item	Ltem	d)	Identical	or Level	Collection	Breakout	Remarks
MONTHLY REPORT OF SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN (Cont.)	FNS-44	FNS-44		Conn Colo				
 Number of service institutions for which claims filed 	(1 b)	(1 b)		Conn Colo				
4. Average daily attendance of ser- vice institutions	(1 c)	(1 c)		Conn Colo	_			
5. Average number of meals served daily in sermice institutions	(1 d)	(1 d)		Conn Colo				
*6. Federal reimbursement claimed	(2)	(2)		Conn Colo				
7. Number of meals served during month and number served free by type of meals	(3 a,b)	(3 a,b)		Conn Colo				
8. Number of service institutions with claims for non-food assistance	(h a)	(4 a)		Conn Colo				•
9. Average daily attendance for non-food assistance service institutions	(q h)	(4 b)		Conn Colo				
*10. Federal reimbursement (4 c) for non-food assistance institutions	(† c)	(† °)		Conn Colo				
11. Remarks	No Item No. No Item No.	No Item No.		Conn Colo				

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PROGRAM School Food Services

		*						
			Federal/		Α	Different		
	Conn	CoJ	State		Source		Category	
Data Type Form 6	Form & Item	Form & Item	Variable	ical	or Level	on	Breakout	Remarks
FOOD SERVICE PROGRAM FOR CHILDREN (Cont.)		†		oton uuto				
12. Certification	No Item No. No Item	No Item No.		Conn Colo				
ANNUAL ACCOUNTING OF PROGRAM FUNDS FOR SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN	FNS-45	FNS-45		Conn Colo				
1. I.D. data	No Item No.	No Item No.		Conn Colo				
*2. Total expenditures prior to June 30	(1)	(3)		Conn Colo				
*3. Obligations on hand or paid and antici- pated July-Sept.	(2 a,b)	(2 a,b)		Conn Colo				
* 4. Total	(8)	(3)		Conn Colo				
* 5. Funds authorized in Notice of Program Limitations	(4)	(†)		Conn Colo				
* 6. Funds not needed	(2)	. (5)		Conn Colo		_		
*7. Additional funds needed	(9)	(9)		Conn Colo				
8. Remarks	No Item No.	No Item No.	×	Conn Colo		-		
9. Certification	No Item No.	No Item No.		Conn Colo	_			
MONTHLY REPORT ON ACTICATE RELATED TO LETTERS OF CREDIT	FNS-373	FNS-373		Conn Colo				
l. I.D. data	(1-5)	(1-5)		Conn Colo				
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School Food Services (5) PROGRAM

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Data Type	Form & Item Form &	Item	Variable		or Level	Collection	Category Breakout	Remarks	
MONTHLY REPORT ON ACTIONS FINS-373 RELATED TO LETTERS OF CREDIT (Cont.)	FNS-373	FNS-373		conn colo					T
* 2. Kind of program and totals by (withdrawa on letter of credit date by reimbursement schools to date by	(9) s ₃ 0	(9)		Conn Colo					
unpaid claims on han by estimated claims incurred but not received to date by total claims paid and on hand)									
* 3. Fund type by (with- drawals cumulative to	(7)	(7)		Conn Colo	-				_
incurred for which funds were not drawn out by total expenses to date)							•		
4. Remarks	No Item No.	No Item No.		Conn Colo					
5. Signature of certification	No Item No.	No Item No.		Conn Colo	•				
NON-FOOD ASSISTANCE PRO- GRAM ANNUAL REPORT OF OPERATIONS	CFP-64	CFP-64		Conn Colo	•				•
1. I.D. data	No Item No. No Item No.	No Item No.	-	Conn Colo					
* 2. Schools serving lunch by number, average	(1)	(1)		Conn Colo	•				
daily attendance and average daily narticipation	-								

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PROGRAM School Food Services

			Federal/		α -	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PROGRAM ANNUAL REPORT OF OPERATIONS (Cont.)	ج CFP-64	CFP-64		Conn Colo				
3. Schools serving breakfast by number, ADA, and ADP	(2)	(2)	_	Conn Colo				
*u. No. of students served (3 a,b) lunch and breakfast by no. of schools, ADA, and ADP	ved (3 a,b)	(3 a,b)	8SS -Pr, Q17	Conn Colo	F/SS Conn Colo		F/SS Conn Colo	F/SS number of students
5. Totals by number of schools, ADA, and ADP	(†	(†)		Conn Colo				
*6. Schools receiving cash (5) assistance under Scction 11 by number of schools, ADA, and ADP	sh (5)	. (3)		Conn Colo				
* 7. Schools receiving over 9¢ reimbursement per lunch under Section 4 by number of schools, ADA and ADP	9	. (9)		Conn Colo				
8. Schools included which did not operate this program previously by number, ADA and ADP	(2)	(2)		Conn Colo				
* 9. Federal cash assistance expended	(8)	(8)		Conn Colo				
10. Rema rk s	No Item No. No Item	No Item No.		Conn Colo	_		*	
ll. Certification	No Item No. No Item	No Item No.	_	Conn Colo				

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School Food Services
C (7) PROGRAM

	Remarks															
	Category Breakout															
Different	Time of Collection									_						
	Source or Level										•					
	Identical	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Golo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo		Conn Colo
Federal/	State Variable			-	,											
	8	C-MS 260	No Ttem No.	No Item No.	No Item No.	No Item No.	FNS-1007	(1)	(2)	(3)	(†)	(5)	(9)	(7)	-	(8)
	Conn Form & Item Form	C-MS 260	No Item No.	No Item No.	No Item No.	No Item No.	FNS-1007	(1)	(2)	(3)	(*	(£)	(9)	(7)		(8)
	Data Type	PROGRAM OUTLAY REPORT	1. I.D. data	2. Kind of program	3. Type of outlay (program and administrative)	4. County code, city code, county or city name by geographical level by dollar outlay by number of bene ficiaries or benefits	SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN (Summer Only)	l. Name and address of sponsor	2. Report of week ending	3. Type of activity	4. Estimated enrollment	5. Period of operation	6. No. of days of operation	7. Estimated daily no.	supplement supper to be served	8. Number of days by category

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School Food Services
(6 (8) PROGRAM

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			Federal/		Ω.	Different			_
Data Type	Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks	
SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN (Summer Only)	FNS-1007	FNS-1007		Conn Colo					
9. Total meals by category	(6)	(6)		Conn Colo		•			
10. Assigned rates by category	(10)	(10)		Conn Colo					
ll. Cost by category	(11)	(11)	·	Conn Colo			•		
12. Total estimated cost	(12)	(12)		Conn Colo					
13. If program approved, estimated costs for food, labor, other and total	(13)	(13)		Conn Colo	,				
14. Remairks	(14)	(14)		Conn Colo	•		•		
15. Name and title	(15)	(15)		Conn Colo					
CIVIL RIGHTS STATUS REPORT	Civil Rights Report	Civil Rights Report		Conn Colo		•			
1. Total number of recipients for school lunch and special milk	No Item No.	No Item No. No Item No.ESS-Pr, Q17	SS-Pr,	Conn Colo			F/SS Conn Colo		
* 2. Total number of assurances due, received, accepted, unacceptable, pending and refusals by school lunch and special milk	(A 1-6)	(A 1-6)		Conn Colo					
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School Food Services C (9) PROGRAM

	6	Kemarks						-		·	
		breakout				-		Conn Colo	Conn Colo	Conn Colo	
Different	_	COllection									
	Source	or Level									
		Identical (Conn Colo	Conn Colo		Conn Colo	•			Conn Colo
Federal/	State	Variable	n	_			_				
•	73	rorm & Item		(B 1-6)	No Item No.	CDE-8 CDE-6	CDE-8 No Item No. P. 1 CDE-6(1)	CDE 6(4,5)	CDE 6 (10)	CDE-6 28,29,30	CDE 6(8)
	Conn	Form & Item Form	CIVIL KIBRES Report	(B 106)	No Item No. No Item No.	SFS-1	(1)	(2)	(3)	(3)	(†)
		Data Type		*3. Total number of compliance field reviews initiated; in process of review; completed; indicating compliance; indicating non-complance and number schedulad by school lunch and special milk	4. Dates, state, and administrating agency	SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN APPLICATION-AGREEMENT	*1. Name and address of sponsor	2. Type of service institutions	3. Average daily attendance by fotal number, full fee paid by reduced fee and free	4. Percent of children with working mothers and from low income families	5. Age range of children attending

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PROGRAM School Food Services
G (10)

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Data Type	Conn Form & Item	Fo	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN APPLICATION-AGREEMENT	SFS-1	CDE-8 CDE-6			+			
6. Source of operation funds by percent	(5)	CDE-8 Schedule C (2)					Conr. Colo	Colorado in narrative form not specific as to fees
7. Present food cost allowance per child per day and specific meals included	(5)	Schedule C (3)	_				Conn Colo	Colorado narrative asking for general expenditures-not cost per child per day
8. Probable program period; hours, days, meals for which assistance requested	(9)	CDE-8 p. 4					Conn Colo	Colorado gives only dates for program
9. Does private food service management company operate programs	(2)	(11)					Conn Colo	
10. Wh er e food is prepared	. (8)	(11)					Conn Colo	
ll. Name of service institution and assigned reimburse- ment rate	No Item No.	CDE-8 Schedule A P. 5					Conn Colo	Colorado includes supper in reimburse- ment category
12. Certification	No Item No.	p. 4	_	Conn Cold				
REDUCED PRICE OR FREE MEAL POLICY FOR ALL SPECIAL FOOD SERVICE PROGRAMS	SFS-3	CDE-8				_		
l. List of criteria for eligibility	(1 a-c)	(5) P· 2					Conn Colo	Connecticut specific eligibility - Colorado asks for written stafement of policy
					-	A		

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School Food Services (11) PROGRAM

		-	Federal/	•	Ð	Different		
	Conn	010	_		Source	Time of	Category	- Accessed
, Data Type	Form & Item Form &	Item	Variable	Identical	or Level	Collection	breakout	remarks
REDUCED PRICE OR FREE MEAL POLICY FOR ALL SPECIAL FOOD SERVICE	SFS-3							
PROGRAMS (Cont.)								
2. Official designater to determine eligibility	(2)							
3. Person taking appeals	(3)							
4. Annual review for continuance	(†)							_
5. Dissemination of policy	(5)							
6. Signature	No Item No.		-	•				CDE 15 is daily
A GUIDE TO AMOUNTS OF FUOD FOR DIFFERENT AGE GROUPS (Special Food Service Program)	SFS-4	CDE-8 CDE-15		_				Colorado menu worksheet
*1. Specific meal and foods served by amount for each age grouping	No Item No.	CDE-8 Schedule B B 1-6		Conn Colo				Colorado provides list while Connecticut has a chart
SPECIAL FOOD SERVICE PRO- GRAM FUR CHILDREN-CLAIM FOR REIMBURSEMENT	. SFS-5	CDE-8				Conn Colo	·	Connecticut monthly form
<pre>l, Name and address of sponsor</pre>	No Item No.	No Item No.		Conn Colo				
2. Agreement number	No Item No.	No Item No.		Conn Colo				
3. Month and year covered by this claim	No Item No.	No Item No.		Conn Colo				
4. Name and address of service institution	No Item No.	Schedule A p. 5		Conn Colo				

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PROGRAM School Food Services

G(12)

	Remarks				Colorado requires name, address of service institution and assigned reimbursement for meals-also lists aggregate number of meals daily but not specific					
	Rei				Colorado address institut ed reim meals-al gate num					
	Category Breakout				Con Colo F/SS	Conn Colo F/SS		Conn		
Different	Time of Collection									
	Source or Level								-	
	Identical						Conn Colo			
Federal/	State Variable				Q17					
	Conn Colo Form & Item Form & Item	CDE-8			Schedule A F. 5 Schedule C (1 a,b)	Schedule C (1 c) CDE-11 (23)	Schedule C (2)	Schedule C		
		- SFS-5	No itsm No.	No Item No.	No Item No.	s: No Item No.	No Item No. Schedule	No Item No.	No Item No.	
	bata Type	SPECIAL FOOD SERVICE PRO GRAM FOR CHILDIEN-CLAIM FOR REIMBURSEMENT	5. Average daily attendance	6. Total number operat- No Item No.	* 7. Type of food by the number served free or reduced by total no. served by assign ed rate of reimbursement, reimbursement claim by total reimbursement.	8. Food service to adults: no. served breakfast, No Item No. lunch, dinner, supplemental	9. Receipts from sale of meals during month thildren's payments, adults payments, Fed. reimbursement received, all other sources	10. Cost of food used during month	<pre>ll. Signature of certifi-No Item No. cation, title of signer, date</pre>	

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School Food Services G (13) PROGRAM

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			Federal/		Q	Different		
Data Type	Conn Corm & Co	lo Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SPECIAL FOOD SERVICE PROGRAM FOR CHILDREN'S PEIMBURSEMENT WORKSHEET	SFS-6							SFS-6 and SFS-6a are worksheets which are used to compile data for SFS-5
1. Month + year	No Item No.							
Day of month by number of meals served to children; to adults; and between meal supplements	No Item No.							
	SFS-6a							
1. Month + year	No Item No.							
Date by cash income by category by cash expenditures by category by value of donations except USDA food	No Itc No.							
SCHOOL BREAKFAST PROGRAM APPLICATION AGREEMENT	SBP-1	CDE-38						
1. Agreement : umber	No Item No.	No Item No.		Conn Colo				
I.D. data	No Item No.	No Item No.		Conn Colo				
Agreements, effectiveNo Item No. period and signature	No Item No.	No Item No.					Conn Colo	Colorado lists a few more agreements than Connecticut,but they are very close
Requirements for a school breakfast	SBP-1 p. 3	CDE-38 P· 4		Conn Colo				
Recordk e eping requirements	р• з	p. 4		Conn Colo				

School Food Services
C (14) PROGRAM

			Federal/		Д	Different		
Data Type	Conn Conr Form 6	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SCHOOL BREAKFAST PROGRAM APPLICATION AGREEMENT	SBP-1	CDE-38						
6. Name, address of school by enrollment number served daily, charge to child, date begin and end for breakfast program	Schedule A P. 4	Schedule A p. 4					Conn Colo	Colorado lists only name and address and "rate"
7. Signature	т • d	ъ. з		Conn Colo				·
SCHOOL BREAKFAST PROGRAM - CLAIM FOR REIMBURSEMENT	SBP-2	CDE-10						
* 1. Name and address of sponsor	(1)	(1)		•			Conn Colo	
* 2. Name and address of school	(2)							
3. Agreement number	(3)	(2)					Conn Colo	
4. Month and year covered by this claim	(†)	(3)					Conn Colo	
5. Regular charge to students	(5)			,				
6. Average daily attendance	(9)	(1)					Conn Colo	
7. Total number operating days this month	g (7)	(13) (A & I+K)					Conn Colo	
*8. Number of breakfasts served free, at reduced rate, total	(8)	(131)	ESS-Pr, Q17				Conn Colo F/SS	
* 9. Total number of break- fasts served	(6)	(13 J)	•		_		Conn Colo	
•								

				,				
			Federal/		Q	Different		
	Conn				_	Time of	Category	,
Data Type	Form & Item Form &	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks
SCHOOL BREAK; AST PROGRAM - CLAIM FOR REIMBURSEMENT	SBP-2 T	CDE-10						
10. Assigned rate of Federal reimbursement	(10)	(13 K)					Conn Colo	
<pre>11. Amount of possible reimbursement (9 X 10)</pre>	(11)	(13 E)					Conn Colo	
<pre>12. Cash from student's payments</pre>	(12)							
13. Food expenditures (food, cost of acquir- ing USDA donated foods used, and total)	(13)	(31 B)	-				Conn Colo	
*14. Amount of reimbursement	(14)							
15 Certification	(12)				,			
SCHOOL BREAKFAST PROGRAM REIMBURSEMENT WORKSHEET	SBT 3	GDE 13		•				SBP 3 is worksheet on which data is collect ed for SPB 2
1. Month + year	No Item No.	(1)						
2. Day of month by number of breakfasts to children + adults (paid and free) by cash income by food expenditures	No Item No.	(4-12)		Conn Colo			Conn Colo	,
APPLICATION AGREEMENT FOR SPECIAL MILK PROGRAM	SM-2A	CDE-9 CDE-6			-			
*1. Name and address of sponsor	(1)	CDE 9 No Item No. CDE 6(2)		Conn Colo				

PROGRAM School Food Services
G (16)

			Federal/	• 1	Q	Different		
Data Type	Conn Form & Item	Colo . Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
APPLICATION AGREEMENT FOR SPECIAL MILK PROGRAM (Cont.)	SM-2A	CDE-9						
2. Agreement Number	(2)	CDE9 No Item No. CDE £(2)		Conn Colo		-		
3. Agreement approved	(3)							
4. Type of non-profit school or institution	(#)	CDE 6(5)					Conn Colo	CDE 6 is an application form used for all aspects of the food services programs
5. Public or private	(5)	(#)					Conn Colo	
6. Period of attendance	(9)	(7)		Conn Colo				
7. Average daily attendance (children, adult,staff and enrolled)	(2)	(10)					Conn Colo	
8. Is food or milk service in school operated by concession- aire or food service management company	. (8) -u	(11)	•				Conn Colo	
9. Opening + closing dates	(6)	(9)		Conn Colo			*	
10. Number of days of operation	(10)							
ll. Nature of program pricing or non- pricing	(11 a+b)	(20)	·	Conn Colo				

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	Remarks			Connecticut more specific on their items than Colorado								SM-2A to continue agreement is same as original form SM-2A
	Category Breakout		_	Conn Colo								
Different	Time of					_						
Д	Source or Level							_				
	Identical											
Federal/												
	Colo Form & Item	CDE-9	(35)	CDE-9 Schedule A CDE 6 (21)								
	Conn Form & Item	SM-2A	No Item No.	Schedule A	SC-1	(1)	(2)	(3)	(†)	(8-8)	(10 A-D)	SM-2A
	Data Type	APPLICATION AGREEMENT FOR SPECIAL MILK PROGRAM (Cont.)	12. Certification	13. Name and address of institution by lunch served, enrollment, cost per 1/2 pt. + school and to child and maximum reimburse ment rate	CLAIM FOR REIMBURSEMENT WORKSHEET FOR SUMMER CAMPS	1. Name of sponsor	2. Agreement number	3. Number of camps	4. Month + year	5. Day by number of children in camp by adult staff member by adults enrolled by months by total	6. Number of half-pints served to adults	APPLICATION TO CONTINUE AG: EEMENT FOR SPECIAL MILK PROGRAM

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School Food Services (7 (18) PROGRAM

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	Conn	Colo	State	1000+1001	Source	Time of	Category	Remarks
MON FOOD ACCTOUNDE	NEA 1 CHEM FOLTIM 6	ישוו פ דרפוו	Adriante		_		350	
APPLICATION - AGREEMENT	Tegy	60-770			_			
l. Agreement number	No Item No.							
2. Approved by date	No Item No.							
*3. Name and address and telephone number of sponsor	3	(1)		Conn Colo				
* 4. Name and address and telephone number of school or institution service	(5)	(2)		Conn Colo			_	
5. Type of school or service institution (public, private)	(3)	(8)					Conn Colo	Connecticut uses only public and private Colorado uses day and boarding
6. Participation (ADA, AD participation in breakfast, lunch, total) by current estimate	(±)	(11 A)		Conn Colo				
7. Food preparation (self-contained kitchen, satellite service, combination)	压- (5)	(8)		Conn Colo				
8. Program plans for use of equipment being purchased (initate, expand, improve)	(9)	(13)					Conn Colo	

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School Food Services (7.19) PROGRAM

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			Federal/		Q	Different		
Data Type	Conn Corn Corn S	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
NON-FOOD ASSISTANCE APPLICATION-AGREEMENT (Cont.)	NFA-1	CDE-39						
*9. Describe general economic condition of the area from which attendance is drawn an circumstances creating such conditions	ch end and	(12)		Conn Colo				
10. Indicate sponsor's plan for financing at least 1/4 of the total cost of equipment to be purchased	(8)	(14)					Conn Colo	Connecticut wants sources listed
ll. Authorized signature, No Item No.		No Item No.					Conn Colo	
*12. Equipment needed: item by specifications, by number of units needed, cost per unit and estimated costs	(6)	(13)					Conn Colo	
13. Date of delivery	(10)	(20)					Conn Colo	
AUTHORIZATION FOR PURCHASE	NFA 3	CDE-39		Conn Colo				
1. Name of sponsor	No Item No.	No Item No.		Conn Colo				
2. Amount of purchase	No Item No.	No Item No.		Conn Colo	-			
3. Date	No Item No.	No Item No. p. 3		Conn Colo				
4. Certification of Delivery	No Item No.	(19)		Conn Colo				

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School Food Services 6 (20) PROGRAM

	1		Federal/		- 1	Different		
Data Type	Conn Form & Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of .	Ca tegory Breakout	Remarks
AUTHORIZATION FOR PURCHASE (Cont.)	NFA 3	CDE-39						
5. Date received	No Item No.	(39)		Conn Colo				
6. Actual cost	No Item No.	(19)		Conn Colo				
7. Signature	No Item No.	No Item No.		Corn Colo	-			
MONTHLY CLAIM FOR FEDERAL REIMBURSEMENT (School Lunch and Special Milk Programs)	SLM-A	CDE-10						
*1. Name of school and town	No Item No.	(1)					Conn Colo	Colorado lists sponsorship agency
2. Agreement number	No Item No.	(2)		Conn Colo				
3. Month and year for which report is for	No Item No.	(3)		Conn Colo	_			
4. Number of schools in report for lunches	(A)	(8,9,10,11 A)					Conn Colo	Colorado lists specific kinds of lunches
5. Number of days served this month	(B)	(8,9,10,11 B)					Conn Colo	
* 6. Free lunches this month	(O)	(8,9,10,11 H)					Conn Colo	
*7. Reduced lunches this month	(a)	(8,9,10,11 G)	_				Conn Colo	
8. Value of donated goods and services	(E)	(31 A-E 28 A,B)					Conn Colo	
9. Total number of type A lunches served to children	(F)		ESS-Pr, Q17		F/SS Conn		F/SS Conn	

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School Food Services **G** (21) PROGRAM

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	(,	Federal/		- 1	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of .	Category	i d
MONTHLY CLAIM FOR FEDERAL REIMBURSEMENT (School Lunch and Special Milk Programs)	SLM-A	CDE-10						Vellary
*10. Reimbursement for lunches	(9)							
*11. Reimbursement for free lunches	(н)	(8-11 HxJ)					Conn Colo	Colorado only provides the items needed to get these pupils -
12. Reimbursement for reduced rate	. (1)	(8-11 Gxù)					Conn Colo	done
*13. Total lunch reimbursement	(3)	(8-11 K)					Conn Colo	
14. Number of schools	(a)	(17,18 A)					Conn Colò	
15. Price for 1/2 pint paid to dealer	(⁴)	(24 Distr. Cost)					Conn Colc	
16. Frice per 1/2 pint paid by child	(0)	(24 Unit Cost)		Conn Colt				
17. Computed reimbursable rate	(q)	(17,18 K)					Conn Colo	
*18. Total 1/2 pints purchased this month	(£)	(24 pur- chased)		Conn Colo				
*19. Number of 1/2 pints served with Type A lunches this month	(g)	(17,18 Type A)		Conn Colo				
20. Number of 1/2 pints served to adults	(e)	(17, 18 Adults)		Conn Colo				
								

PROGRAM School Food Services 0 (22)

		y Remarks				110	010		olo Colorado-not specific daily lunch charge	olo Colorado asks for ADA or ADM)Jo		Both Colorado forms are filed monthly	
		Category				Conn Colo	Conn Colo		Conn Colo	Conn Colo	Conn Colo			
	Different	Time of											Conn Colo	
	1	Source for Level							,					
•	_1	Identical			Conn Colo							Conn Colo		
0 \22	Federal/													
		100	-10		(17,18 I)	(17,18 J)	(17,18 K)		(20)	(†	(8-11+17, 18 K)	No Item No.	CDE-11 CDE-12	
<u> </u>		Conn Conn Co	SLM-A	(;)	(k)	(1)	(m)	(u)	No Item No.	No Item No.	No Item No.	No Item No.	SLM-B	(1,2)
			MONTHLY CLAIM FOR FEDERAL REIMBURSEMENT (School Lunch and Special Milk Programs) (Cont.)	*21. Number of 1/2 pints not reimbursable	*22. Number of 1/2 pints reimbursable	23. Applicable reimburse- ment rate for milk	*24. Gross reimbursement for milk	*25. Net reimbursement for milk	26. Daily lunch charge (child, reduced rate, adult)	27. Average daily attendance of schools included in report	28. Lunches and milk	29. Authorizing signature, No Item No. data	SEMI_ANNUAL INCOME AND EXPENDITURE REPORT	l. Whether filing report for 1/2 year or full

School Food Services **C** (23) PROGRAM

Data Type Form & Item Form & Item Form & Item Paderal / State -ANNUAL INCOME AND SIM-B CDE-12 CDE-12 ANNUAL INCOME AND SIM-B CDE-12 CDE-12						4			
Data Type				Federal/		Α	Different		
DE-11 CDE-12 CDE 11(1) Dalance CDE 11(1) CDE 11(1) CDE 11(1) CDE 11(1) CDE 11(1) CDE 11(2) CDE 12(1,2 F,G) CDE 12(1,2 F,G) CDE 12(1,2 F,G) CDE 12(1,2 CDE 12		Conn Form & Item	Colo Form & Item				Time of Category	Category Breakout	Remarks
Beginning cash (A) CDE 11(1) balance (Value of beginning) (B) food inventory (C) (CDE 11(6) Cash receipts for Type A lunches (D) (CDE 11(7-22) Other cash income (D) (CDE 11(29) except Federal reimbursement (E) (CDE 11(29) reimbursement (F) (CDE 12(1,2) food (H) (CDE 12(1,2) food (H) (CDE 12(3,6) labor (H) (CDE 12(4.6) Cash expenditures (J) (CDE 12(1,4)) A lunch (L) (DE 12(1,4))	SEMI-ANNUAL INCOME AND EXPENDITURE REPORT(Cont.)		CDE-11 CDE-12						
Value of beginning food inventory (B) (B) Cash receipts for Type A lunches (C) CDE 11(6) Other cash income, except Federal reimbursement (D) CDE 11(7-22) except Federal reimbursement (E) CDE 11(28) checks received (F) CDE 12(1,2 food (G) CDE 12(1,2 food (H) CDE 12(3 G) cash expended for (H) (H) CDE 12(3 G) labor (H) CDE 12(1,2 cother cash expendi- (H) (DE 12(1,2) cher sypenditures (J) CDE 12(1,4) A 1-8 Cash balance June 30 (K) CDE 12(14) Value of food inven- (L) (DE 12(18) CDE 12(18)	Beginning balance	(A)	CDE 11(1)				Conn Colo		
Cash receipts for (C) CDE 11(6) Type A lunches Other cash income, (D) CDE 11(7-22) except Federal reimbursement Federal reimbursement Cash expended for (F) CDE 11(29) Cash expended for (G) CDE 12(1,2 food Cash expended for (H) CDE 12(3,6) Labor Other cash expendi- (I) CDE 12(3,6) Cosh expenditures (J) CDE 12(4-6 G) Total expenditures (J) CDE 12(14) Value of food inven- (L) CDE 12(18) Value of food inven- (L) CDE 12(18)		(B)							
Other cash income, compexcept Federal reimbursement (E) CDE 11(28) Federal reimbursement (E) CDE 11(28) Total income (F) CDE 11(29) Cash expended for (G) CDE 12(1,2 F,G) Cash expended for (H) CDE 12(3 G) Cash expended for (H) CDE 12(4-6 G) Cash expended for (H) CDE 12(4-6 G) Conn tures Total expenditures (J) CDE 12(14) Cash balance June 30 (K) CDE 12(14) Value of food inven- (L) CDE 12(18) Value of food inven- (L) CDE 12(18)		(0)					Conn Colo	Conn Colo	Colorado - all lunches not just Type A
Federal reimbursement checks received (E) CDE 11(29) Conn Total income food (F) CDE 12(1,2 fold) Conn Cash expended for food (H) CDE 12(3 G) Conn Cash expended for labor (H) CDE 12(4-6 fold) Conn Other cash expenditures (J) CDE 12(14-6 fold) Conn Total expenditures (J) CDE 12(14) Conn Value of food inven-fory June 30, 1971 (L) CDE 12(18) Conn		(D)					Conn Colo	Conn Colo	
Cash expended for (G) CDE 12(1,2 food does not be spended for (G) CDE 12(1,2 food cash expended for (H) CDE 12(3 G) food labor (H) CDE 12(4-6 food invenditures (J) CDE 12 (7 G) CPIR III (COND A 1-8 food invenditure) (L) CDE 12(14) food invenditure (COND COND A 1-8 food invenditure) (L) CDE 12(14) food invenditure (L) CDE 12(18) food invenditure (L)		(E)	7				Conn Colo	Conn Colo	Colorado - total reimbursement not just federal
Cash expended for (G) CDE 12(1,2 F,G) Cash expended for (H) CDE 12(3 G) Cash expended for (H) CDE 12(4-6 G) Cuther cash expendi- (I) CDE 12(4-6 G) Conn (Conn		(F)	CDE 11(29)				Conn Colo	Conn Colo	
Cash expended for labor (H) CDE 12(3 G) Other cash expendi- (I) CDE 12(4-6 G) Other cash expendi- (J) CDE 12 (7 G) CPIR III Total expenditures (J) CDE 12 (7 G) CPIR III Cash balance June 30 (K) CDE 12(14) Value of food inven- (L) CDE 12(18) tory June 30, 1971 (L) CDE 12(18)	Cash	(9)	CDE 12(1,2 F,G)				Conn Colo	Conn Colo	
Other cash expendi- tures G) Conn Total expenditures (J) CDE 12 (7 G) CPIR III Cash balance June 30 (K) CDE 12(14) A 1-8 Conn Value of food inven- tory June 30, 1971 (L) CDE 12(18) Conn Conn	Cash expended labor	(H)					Conn Colo		
Total expenditures (J) CDE 12 (7 G) CPIR III A 1-8 Cash balance June 30 (K) CDE 12(14) Value of food inven- (L) CDE 12(18) tory June 30, 1971		(i)					Conn Colo		Colorado - more specific
Cash balance June 30 (K) CDE 12(14) Conn Value of food inventory June 30, 1971 (L) CDE 12(18) Conn		(£)			_	_	Conn Colo	F/SS Conn Colo	
Value of food inven- (L) CDE 12(18) tory June 30, 1971	Cash balance June	(K)				_	Conn Colo		
(10)		(T)					Conn Colo		
Accounts receivable (M) CDE 11(34)	14. Accounts receivable	(M)	CDE 11(34)				Conn Colo		

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PROGRAM School Food Services
G (24)

		ı —			-					· 	
	Remarks										
	Category Breakout				Conn Colo				F/SS Conn		
Different	Time of Collection		Conn Colo	Conn Colo	Conn Colo						
	Source or Level					Conn	Conn				
	Identical									•	
Federal/	State Variable								ESS-Pr, (17		
		CDE-11 CDE-12	CDE 11(37)	CDE 11(38) CDE 12(14)	No Item No.	No Item No.	No Item No.				
	Conn Colo	SLM-B	(N)	(0)	No Item No.	No Item No.	No Item No.	SLM-C	No Item No.	No Item No.	No Item No.
	Data Type	SEMI-ANNUAL INCOME AND EXPENDITURE REPORT(Cont.	15. Accounts payable	16. Accrued balance	17. Name and address of SLP	18. Agreement number	19. Authorizing signa- ture, date	SEMI-ANNUAL REPORT OF ELIGIBLE CHILDREN FOR FREE OR REDUCED PRICE LUNCHES	*1. Number of children receiving a free or reduced price lunch or approved to receive such	*2. Number of additional No Item No. children believed to be eligible under approved eligibility criteria but have not made application	*3. Total number of children in school district eligible for free or reduced price lunch

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	Remarks										
	Category Breakout										
Different	Time of . Collection										
	Source or Level				·				<u>.</u>		
	Identical					,					
Federal/	State Variable										
-	Colo Form & Item		•								
	Conin	SLM-C	No Item No.	SLM-(Cont.)	No Item No.	No Item No.	No.Item No.	No Item No.	No Item No.	No Item No.	5
	Data Type	RT OF EN FOR PRICE	4. Authorized signature, date	APPLICATION TO CONTINUE SCHOOL LUNCH AND/OR SPECIAL MILK PROGRAM	<pre>1. School lunch, and special milk agree- ment numbers</pre>	2. Whether or not food or milk service will be operated by a concessionaire of food service management	*3. Name of agency operating program	4. Approval signature of title of signer, date of application	5. Name and school address of person in charge of program	6. Signature, title, address of person (other than person in charge)who will be signing the reimbursement claim	7 0

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			Federal/		ı	Ulfrerent		
Data Type	Conn Form & Item	Colc Form & Item	State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks
APPLICATION TO CONTINUE SCHOOL LUNCH AND/OR SPECIAL MILK PROGRAM (Cont.)	SLM-(Cont.)							
8. Income received (June + Sept. 1,1970)	(2)							
9. Total	(3)		_					
<pre>10. Cash expenditures between June + Sept. 1</pre>	(†)							
ll. Cash balance	(5)							
l2. Cash value of food on hand	No Item No.					-		
13. Schools to be continued by name, enrollment, number Type A served daily, by daily lunch charge, opening date, cost per 1/2 pint of milk to school and child	No Item No.							
NATIONAL SCHOOL LUNCH PRUCRAM AMENDMENT NO. 1	Agreement Form	CDE-7 p. 2 (15)						
<pre>1. Signature of school, system or child care instruction and date</pre>	No Item No.	e .d		Conn Cold				
2. Signature, title and date of State Depart.ment of Education	No Item No.	٠. ن	-	Conn Cold				
			+	7			1	

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Dotto Demo	Conn	Colo	State	Identical	Source or Level	Time of	Category Breakout	Remarks
NATIONAL SCHOOL LUNCH PROGRAM AGREEMENT								
1. Sponsor		No Item No.			_			
2. Agreements		p.p. 1-3					,	
3. Signature		p. 3						
4. Requirements		p.p 4-5						
*5. Agreement No. by name and address of school by listing of programs in which schools are participating	ting ting	Schedule A						
APPLICATION AND AGREEMENT FOR"COMMODITY ONLY SCHOOLS"	Src-2	CDE-6			_			
* 1. Name of agency	No Item No. (1) (3	(1) (31)		Conn Colo			Conn Colo	Colorado - one application for all aspects of lunch program
2. Lunch manager and address	No Item No.			•				
3. School address	No Item No.	(1)		Conn Colo				
4. Administrator	No Item No.			Conn Colo				
5. Title, date	No Item No.	(32)		Conn Colo				
6. Authorized represen- No Item No.	No Item No.	(32)		Conn Colo				

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PROGRAM School Food Services

	Remarks		Colorado - ADA not enrollment		Connecticut is monthly renort form:	Colorado is application form and is per school									
	Category Breakout		Conn Colo												
Different	Time of . Collection				Conn Colo					_		Conn Colo		-	
	Source or Level														
	Identical													_	
Federal/	State Variable												-		
	Colo Form & Item)	(1,10,9,13, 14,6)		CDE-6		(1)	(1)	(2)			(10)			
,	Conn Form & Item		Schedule A		SLC-4		No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	
	Data Type APPLICATION AND AGREEMENT	FOR "COMMODITY ONLY SCHOOLS"	7. Name of school by enrollment by number served daily, served free. lunch charge	amount of funds on hand, cash value food, approximate dates	COMMODITY - ONLY SCHOOLS REPORT FORM		1. Name and address of sponsor	2. Name and address of school	3. Agreement number	4. Month covered by this No Item No. report	5. Number of schools in this report	6. Average daily attendance	7. Average number of lunches served daily	8. Total number operatingNo Item No. days this month	

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School Food Services (729) PROGRAM

			Fodenal /		А	Different		
	Conn	_			Source	Time of	Category	,
COMMODITY - ONLY SCHOOLS REPORT FORM (Cont.)	SLC-4 CDE-6	CDE-6	Variable I	Identical	or Level	Collection	Breakout	Rem arks
9. Total number of free lunches served to children meeting eligibility standards	(A)	(19a by Free)				Conn Colo	Conn Colo	Colorado application form as opposed to Connecticut monthly report
10. Total number of reduced price lunches served to children meeting eligibility standards	(B)	(19a by 'Reduced)				Conn Colo	Conn Colo	
ll. Total number of lunches served to children meeting the lunch type requirements	(C)	(19a)		٠		Conn Colo	Conn Golo	
12. Authorizing signature, No Item No.	No Item No.	(32)						
SEMI-ANNUAL REPORT FORM OF LUNCH SERVICE OPERATIONS	SLC-6	CDE-11 CDE-12				Conn Colo		Colorado a monthly report Connecticut semi-annual
1. Name and address of School Food Authority	(1)	No Item No.	<u> </u>	Conn Colo				
2. Agreement number	(2)	No Item No.	<u> </u>	Conn Colo				
3. Reporting period	(3)	No Item No.				Conn Colo		
4. Name and address of school and totals by receipts from child- ren's payments by all other cash receipts by	(h-9)	CDE11(6-12B) (13-14) (14-19) CDE12(1) (2-6)				Conn Colo	Conn Colo	
e:penditures for all food by all other expenditures by value of donated goods and								
services								

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PROGRAM School Food Service C(30)

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nn Item Form & Item Va	_	Sta Varia		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SLC-6 CDE-11 CDE-12	CDE-11 CDE-12					Conn Colo		
(10-12) No Item No.	o Item No.			Conn Colo				
SA-1							٠	
(1)				•				
(2)					_			
(3)				•				
(4)								
(5)			_					
(9)								
(7)				*	_			
No Item No.								-
					•			

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PROGRAM School Food Services C(31)

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			Federal/		-	Different		
Data Type	Conn Conn Form &	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
DAILY FOOD SERVICE WORKSHEET		CDE-14						
1. School		No Item No.						
2. Month + year		No Item No.						
3. Day by number of children getting supper with and/or		No Item No.						
williour milk;by paid, free, reduced by snack with and without milk; by								
adults with snack and/or supper with or without milk	•							
INVENTORY WORKSHEET		CDE-16						
<pre>1. Received and issued</pre>	-	(1)					•	
2. Meal		(2)						
3. Date	•	(3)						
4. School or institution	Ę	(†)						
5. Agreement Number		No Item No.						
6. Date by description by unit by quality by price by purchase by USDA. by other donation and total		(5-12)						
7. Food on hand	_	(14)						
8. Received		(15)						
9. Served		(16)						

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PROGRAM School Food Services
C (32)

			,	(25)				
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Data Type	Conn Corm & Co.	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Seman Se
INVENTORY WORKSHEET(Cont.)	(}	CDE-16			1			
10. On hand		(11)			_			
13. Delivery Charges		(18)	-					
12. Physical inventory taken this month		(19)						
l3. Non-food items		(20)			,			
14. Received		(21)	•	_				
15. On hand		(22)						
16. Signature and date		(23,24)		_				
INCOME AND EXPENDITURE WORKSHEET		CDE-17						
1. Day by food and milk by child and adult by reimbursement by district by donation by other by total	rict	No Item No.						
2. Receivable income		(10)						
3. Claim SFS		(11)						
4. Other Federal		(12)					_	,
5. Other		(13)						
6. Total		(14)					,	
EXPENDITURES WORKSHEET		CDE-37	•					
1. Month + year		No Item No.				_		
2. School		(2)						

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School Food Services 3 (33) PROGRAM

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Ē	Conn		State		_	Time of		,	
EXPENDITURES WORKSHEET	FORTH & LESS COE	CDE-37	variable	Taenticat	Or. Dever	COTTECTION	breakout	Kemarks	T
(Cont.)					_				
3. Agreement humber		No Item No.							
4. Day by deposit by child and + number by balance		(3-7)							
5. Expenditures by day for food, milk, labor, equipment, other and total		(8-13)			_		-		
6. Balance beginning		(14)							
7. Deposit		(15)							
8. Checks written		(16)							
9. Ending balance		(11)							
10. Payable expense loans	su	(18)							
11. Previous month remaining		(19)							<u>-</u>
12. Current month		(20)							
13. Total		(21)					_		
ADMINISTRATIVE REVIEW REPORT		SL 21		-	-	-			-
<pre>1. I.D. data and ADA by level</pre>		No Item No.						·	
2. Name of program manager		(1)							
3. Total No. of meals by type		(2)							

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PROGRAM School Food Services C (34)

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		,	Federal/	. •	1	211616116		
Data Type	Form & Item Form &	_	o State Item Variable	Identical	Source or Level	Time of	Categomy Breakout	Remarks
ADMINISTRATIVE REVIEW REPORT (Cont.)		SL 21						
4. Daily average served children on previous month		(3)						
5. No. served free or reduced by children and adults		(†)						
6. Charge/meal by children (daily and monthly) by adults	-	(5)					_	
7. No. of school lunches per school		(9)						
8. School policy on free meals		(7)						
9. Procedures to avoid discrimiation		(8)						
<pre>10. Does school avoid segregation between paying and non-paying children</pre>	au -	(6)						
il. Is same meal granted to all		(10)						
12. Did meal served meet contract requirements	- or	(11)			•			
13. Does manager figure amounts of food used	_	(12)	ŕ					
							_	

PROGRAM School Food Services C(35)

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	Conn	Colo	State		Source	Time of .	Category	
Data Type	Form & Item Form &	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks
ADMINISTRATIVE REVIEW REPORT (Cont.)		SL 21						
<pre>14. Is school in special milk program (time of day, cost and charge)</pre>		(13)						
<pre>15. Has public nealth officer come this year</pre>		(14)						
16. How are dishes cleanned		(15)						
<pre>17. Is equipment satisfactory to meet needs</pre>		(16)					_	
<pre>18. Is actual count made of meals with/without milk</pre>		(17)		. <u>.</u>			-	
19. Is CDE 15 used		(18)						
20. Does manager know donated commodities and value		(19)		•				
21. Do workers have health certificate		(20)		•				
22. Are adult meals recorded		(21)		. 		-		
23. Prall adults except cooks pay for lunch	- + -	(22)						
24. Is flavored milk served and how often	u	(23)						•

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PROGRAM School Food Services C(36)

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	Conn	Colo	rederal/ State		Source	Time of	Category	•	
Data Type Fo	Form & Item Form &	Form & Item	>	Identical	or Level	Collection	Breakout	Remarks	
ADMINISTRATIVE REVIEW REPORT (Cont.)		SL 21							
Who supervises lunch room - and explain		(54)							
Are servings adjusted to age of student and are second helpings permitted		(25)							
Explain extras offered in addition to lunch		(26)							
Does school offer any type food service to compete with Type A lunch		(27)							
Is there adequate storage		(28)							
Is storeroom neat and orderly		(53)							
Are foods used first- in-first out basis; are dates checked		(30)						•	
Are separate bank or ledger control accounts kept on program foods	-	(31)							
33. Who submits claim form and where are records maintained		(32)		-					

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PROGRAM School Food Services
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	Remarks										٠		
	Ren											 	
	Category Breakout												
Different	Time of Collection												
1	Source or Level					 _							
	Identical						_	-				 _	
Federal/	State Variable												
	lo Item	SL 21	(33)	No Item No.	No Item No.								
	Conn Corn Form 6												
	Data Type	ADMINISTRATIVE PEVIEW REPORT (Cont.)	34. Actual number served free and reduced	35. Comments	36. Signature								

TRANSPORTATION PROGRAM

Transportation **D** (1) PROGRAM

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Principal Principal

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			Federal/	••	- 1	Different		
Data Tune	Conn Form £ Item	Colo	State Vaniable	Identical	Source	Time of	Category	272.00
ANSPORTA	Grant Appli-	CDE-40	Т			101777170	Tr caroar	Nemarks
UND PART I - TCATION OF ORTATION ND CDE-40	cation Schoo Transporta- tion ED011	-						
"1. LEA number and county, date	No Item No.	No Item No.					Conn Colo	
*2. Signature of super- intendent of schools	No Item No.							
*3. Salaries		Section A,1			·			
*4. Contracted services		Section A,2			-			
*5. Replacement of vehicles	IIE	Section A,3					Conn Colo	
<pre>*6. Replacement of school buses</pre>		Section A,6	•					
*7. Transportation insurance		Section A,4						
*8. Other expenses		Section A,5						
*9. Total	σı	Section A,7		Conn Colo			Conn	
10. Capital outlay		Section B,1			·			
ll. Student artivities		Section B,2						
12. Field trips	IIE	Section B,3					Conn Colo .	
13. Administration and grounds		Section B,4						•
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Transportation D (2) PROGRAM

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	Conn Form & Item	Fo1	State Variable	Identical	Source or Level	Time of Collection	Jategory Breakout	Remarks
PUBLIC SCHOOL TRANSPOR- TATION FUND PART I - CERTIFICATION OF TRANS- PORTATION COLORADO CDE-40 (Cont.)	Grant Appli- cation Schodl Transporta- tion ED011	CDE-40	,					
<pre>14. Use of vehicles not in compliance with regulations</pre>		Section B,5						
15. Other non-reimburs- able transportation expense		Saction B,6						
16. Total		Section B,7				•		
17. Transportation expense	IA	Section C,1	CPIR (J). Al-8				F/SS Conn Colo	
⁴8. Non-Reimbursable expense		Section C,2						
19. Reimbursable expense	IIIF	Section C,3	-	Conn Colo				•
PART II REIMBURSEMENT DETAILS	ED011	CDE-40				•		
20. In Colorado, to adjoining State by:								
* A. Transportation expense		н						
* B. Yearly total miles punils transported		8						
' C. Aggregate days of attendance of pupils		က						

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Transportation **D** (3) PROGRAM

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Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PUBLIC SCHOOL TRANSPOR- TATION FUND PART II - REIMBURSEMENT DETAILS (Cont.)	ED011	CDE-40	·					
* D. Number of pupils for whom board paid		#						
E. Number of days for which board paid		ហ						
F. Amount paid for board		ၒ			,		•	
21. Number of bus drivers		н						
*22. Number of district driven buses this year .		7						,
23. Number of district owned buses last year ,		m						
24. Number of district owned buses replaced by comparable sized buses		=						
. 25. Secretary signatures, LEA number, date		No Item No.	-			·		
25. For each route number		No Item No.						
A. Number days in operation		No . em No.			_			
* B. Number of miles traveled empty, full district "A"or		No Item No.						
sng "B"								

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Transportation **D** (4) PROGRAM

							•	
			Federal/			Different		
Data Type	Conn Corn Form 6	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PUBLIC SCHOOL TRANSPOR- TATION FUND PART II - REIMBURSEMENT DETAILS (Cont.)	ED011	CDE-40		,				
<pre>% C. Number of miles traveled, empty, full, contrast "A" or "F' bus</pre>		No Item No.		•				
* D. Number of miles traveled, empty, full, "C" bus		No Item No.		-	•			•
* E. Total miles each day		No Item No.						٠
F. Bus make		No Item No.						
G. Year of bus		No Item No.	•					
H. Pupil Capacity		No Item Nö.						
I. R, A, or OLY		No Item No.						
GRANT APPLICATION SCHOOL TRANSPORTATION	ED011		_	-				
]. ID Data		-		·				
#2. Transportation expenditure - ED001, 1410b	IB		CPIR IIIA 1-8				F/SS Conn	
3. Bus depreciation	ΟI						_	
4. Transportation - special education grant	IIG							

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PROGRAM Transportation D(5)

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Data Type	Conn Form & Item	Colo Form & Item		Identical	Source or Level	Time of	Category Breakout	Remarks
GRANT APPLICATION SCHOOL TRANSPORTATION (Cont.)	ED011							
5. iransportation - disadvantaged	HII							
6. Transportation receipts	IIJ.	_						
7. Total deductions	IIK							
* 8. Number of pupils transported free and reimbursable transportation expenditures by								
* A. Local public schools	IVM							
* B. Non-local public high schools	IVN							
% C. Non-local voca- tional technical	IVO							
agricultural and total	IVQ			•				
%9. Town, completed by, date	No Item No.							
10. For each vehicle								
A. Date of purchase	io Item No.					_		
B. Identification Number	No Item No.	-						
C. Net Cost	No Item No.				_			

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Remarks | Category | Breakout Conn Colo State Source Time of Form & Item Variable Identical or Level Collection Different Transportation D (6) PROGRAM No Item No. No Item No. ED011 Data Type
GRANT APPLICATION
SCHOOL TRANSPORTATION
(Cont.) D. Depreciation E. Total COMPLIANCE MANAGEMENT - STATE PLAN

SCHOOL LIBRARY PROGRAM

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Data Type	Conn Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ANNUAL REPORT OF FELERAL ASSISTANCE FOR TITLE II BY STATE	06 77 30	OE 4490		Conn, Colo.				
% 1. State Administration: Personnel end Ex- penditures	Section A	Section A		Conn.Colo,				
 LEA Acquisition Expenditure (item by amount by total) 	Section B	Section B	CPIR, IVB 5 Conn. Colo	Conn.Colo.			F/SS	F/SS divides out by public, non-public and totals
,								processed, non-
3. Summary or Expenditures	Section C	Section C		Conn.Colo.				
%4. Adjustments to repeated expenditures this year	Section C	Section C		Conn.Colo.				
5. Adjustments - Previous fiscal years	Section C	Section C		Conn.Colo.				
APPLICATION FOR RIGHT- TO-READ GRANT	89-10-II Part I							
* 1. Grant for \$2,000	(1)							
2. Location of project	(2 A ,B)				,			
* 3. Grade level	(2C, D)							
* 4. No. of children	(2E)							
" 5. No. of teachers	(2F)	٠						
		_	_	_	_	_		

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PROGRAM School Library

Federal/ Source Time of Gategory Remarks	
State Source Time of Category Variable Identical or Level Collection Breakout Conn.Colo. Colo. Conn.Colo. Colo. Colo	
Conn. Colo.	Conn Colo
Conn. Colo. Conn. Colo.	89-10-II
Conn. Colo. C	(56)
Conn. Colo.	(2H)
	(2I) CDE 90 (5,6,7)
8 8	Estimated number and (2J[1-3g]) cost of requested macerial (library, periodicals, specific audio-visual media)
0 0	(23[4])
	(23[5])
	(2J[6])
listing of objective and activities by school Colo more general descriptions - stressing Right-to- Read - by LEA and by BOCS.	Part IIA CDE 90
	Part IIB CDE 90 (3)

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			(2)					
			Federal/		Q	Different		
	Conn	Colo	State		Source	Time of	Category	
Data Type	Form & Item Form &	Item	Variable	Identical	or Level	Collection	Breakout	Remarks
APPLICATION FOR RIGHT- TO-READ GRANT (Cont.)	11-01-68							
T3C. Evaluation	Part IIC							
* D. Storage	Part IID					-		
14. Certification	Part IIE							-
FINANCIAL ALLOCATION AFFIDAVIT	89-10-II Part III	·	,					,
1. Certification	p. 1		•					
2. Quarterly allocation	p. 2							
INDIVIDUAL SCHOOL APPLI- CATION FOR INSTRUCTIONAL MEDIA	59-10-II Part I							89-10-II is filled out by both public and non-public
								schools; non-public form includes data on local and private
								innds spent in last three years.
<pre>l. Name of school, I.D. data, enrollment, no. of teachers</pre>	G ,		ESS-Pr, Q7				F/SS Conn	
cost of materials (library books, periodicals, and audio-visual media) commercial processing delivery, grand total	(2A-F)		CPIR, IVB5		F/SS Conn	F/SS Conn F/SS	F/SS Conn	F/SS almost identical; includes public, non- public, elementary and secondary 89-10-II is estimate
							_	

			7 (+)			-		
			Federal/		מ	Different		
Data Type	Conn Corn Form &	lo Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
INDIVITUAL SCHOOL APPLICATION FOR INSTRUCTIONAL MEDIA (Cont.)								
*3. Essay on instructiona needs serviced	(£)	CDE 90 * (3)						
*4. Essay on long-range plan to improve service	(4)	CDE 92 Part II(4)				Conn Colo		
*5. Improvement of school instructional media	1 (5)	CDE 92 Part II(1)	·		_ ~	Conn Colo		
*5. New school libraries established by level	(6.1)		CPIR, IVB4	<u>.</u>	F/SS Conn		F/SS Conn	F/SS - no total
*7. Pupils served	(6.2)							
*8. Library collections expended	(6.3)							
5. Vertification	(3)							
SUMMARY SHEET OF PROJECT APPLICATIONS	89-10-II Part II	CDE 90%(1)						CDE 90 is a form submitted by both the LEA's and the BOCS's The data is essen-
"1. Name of District	(1)	. (1)		_				tially the same, although the level is different.
			-			ŧ		
			†					

			Podens 1 /		Ω	Different		
Data Type	Conn Form Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SUMMARY SHEET OF PROJECT APPLICATIONS (Cont.)	89-10-II Part II	CDE 90						
*2. No. of public schools pupils, teachers participating by elementary and secondary	£	(2A,B) p. 2	CPIR, IVB3	Conn.Colo			F/ss	F/SS-no teacher break- out by level, no no. of schools
*3. No. of public schools teachers, not par- ticipating by ele- mentary and secondary	(III)							
4. No. of private schools, pupils, teachers participating	(IV)	·(2C, D)	CPIR, IVB2 CPIR, IVB3	Conn.Colo	•		F/SS	F/SS - no teacher breakout by level, no no. of schools
"5. No. of non-public not in program	(A)							
% 6. Summary of kinds and costs of mresials - public school (library, periodicals audio-visual media, commercial processing delivery charges, total	(VI) A-F	CDE 90 (8) CDE 92 * p. 1 6-AF-2-6	CPIR, IVB5			F/SS F/SS Conn.Colo.	F/SS Conn. Colo.	F/SS most nearly matches CDE 92 and 89-10-II, estimate vs. actual Conn more specific items Colo more general categories and by elementary and secondary levels. Also CDE 92 is annual report as opposed to projections, but 6-AF-2-6 requires a specific list by item and cost for each district

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School Library	
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	Remarks		F/SS - estimate vs. autual	F/SS - estimate vs. actual					Conn specific items by amount each fiscal year. Colo general cate- gories by local and			
	Category Breakout		F/SS	F/SS		-	Conn.Colo.		Conn.Colo Co F/SS b			
Different	Time of Collection		F/SS	F/SS			•					
	Source or Level									· 		
	Identical											
Federal/			SPIR, IVB5	CPIR, IVB5			·		CPIR, IIIA 1-8	No Item No	No Item No	No Item No
	nn Colo Item Form & Item			CDE 90 (8)	(6)	(10)	p. 5	CDE 90	(6,10)			
	Conn Form & Item	89-10-II Part II	VII	p. 4			č v	.89-10-II Part IV	Ð.	(1.1)(2.1) (3.1)	(1.2)(2.2) (3.2)	(1.3)(2.3)
	Data Type	SUMMARY SHEET OF PROJECT APPLICATIONS (Cor .)	7. Summary of kinds and costs of materials non-public	8. Grand total	9. Amount per capita (168-169) local and private funds	10. Amount per capita (this year)	<pre>11. Certification (Superintendent)</pre>	MAINT:MANCE OF LOCAL EFFORT - PUBLIC SCHOOLS	it. Financial data on local and private money spent on these items ('68-69) ('69-70)	*A. Textbooks	*B. Library books, periodicals	⊹C. Audio-visual

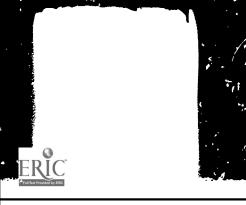
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	Conn		State State			Time of		,
Data Typ e	Form & Item Form &	Form & Item	Variable	Identical	or Level	Collection	Breskout	Remarks
MAINTENANCE OF LOCAL EFFORT - PUBLIC SCHOOLS (Cont.)	89-10-II Part IV	СDЕ 90	CPIR, IIIA 1-8					
%1D. Grand Total	(1.4)(2.4) (3.4)		NoItemNo.					
TITLE II -ESEA ENTITLE- MENTS	Entitlement Form	94 94						
1. Superintenden							Conn.Colo.	Conn Names super-
*2. Gross amount								Intendent Colo School dis-
3. Public school								trict
Non-public school							,	
5. Names of non-public schools								
MEDIA INVENTORY BY SCHOOL	En 072				_			
"1. Name of school	No Item No.		•					
2. Grade level	No Item No.			~				
3. Student population	No Item No.							
4. Teachers	No Item No.							
5. Inventory	No Item Nc.							
* A. Printed volumes	No Item No.							
*B. Magazine subscrip- tions	No Item No.							



			Federal/		1	Different		
Data Type	Conn Form & Item	Colo Item Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
MEDIA INVENTORY BY SCHOOL (Cont.)	ED 072							
³ 5C. Magazine index	No Item No.			,				
*D. Newspaper subscrip- tions	No Item No.							
*E. Itemized list of all categories by number	No Item No.							
*6. No. of media person- nel in program	No Item No.							
LIST OF LIBRARY AND AUDIO-VISUAL ON HAND	89~10-A						· .	
*1. I.D. data				_				
*2. Books by no. of volumes	н-							
*3. Audio-visual by no. of materials	H							-
14. No. of periodicals	III				_			
5. Audio-visual(in central depository)	ΔI						•	
GRANT APPLICATION FOR STATE AID FOR LIBRARY BOOKS	ED 013					<u>.</u>		
*(Name of school, amount paid for library books, grant)								
				-				

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			Federal/		A	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PUBLIC LIBRARIES FISCAL REPORT		CDE 35	•					
*1. I.D. data (including how established)		,						
2. Tax funds from dif- erent levels		(1)			•			
3. Receipts from local government units		(2)						
"4. City or county funds not appropriated by item.		(3)						
PUBLIC LIBRARIES STATUS	_							
REPORT		CDE 99						
TITLE II ESEA FUNDS REQUEST		CDE 91						
*1. I.D. data								
* 2. * amount approved								
STATE LIBRARY INVENTORY		CDE 86						It appears that this
<pre>% (Item, Author, Publisher, Subject, Description)</pre>	- pr -							for each item in a library bought with
				.				money
			_			,		
			_			•		

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PROGRAM School Library

Colo State, CDE 85 No Item No. CDE 92 CDE 92 CDE 92				Fodons 1 /	A	Different	
m No. m No.	Conn	in T+om			 Source	Time of	Remarks
No Item No. No Item No. CDE 92		1		T	 1000		
No Item No. CDE 92			No Item No.				
CDE 92			No Item No.				
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COMPENSATORY EDUCATION PROGRAM

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PROGRAM Compensatory Education F(1)

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	Remarks				F/SS source of funding of program in school as Title I			
	Categ o ry Break o ut				F/SS, Conn.	Conn. Colo.		Conn. Colo. F/SS
Different	Time of Collection		Conn., Colo.					
	Source or Level				F/SS, Conn.		_	
	Identical		Conn.		<u> </u>			
7. 40.00.1					ESS-Pr, Q15	£ 0		CPIR, II A,B,C, CPIR, IID
	lo Item		CDE 33(5)			CDE 113 CDE. Parts II C&I Sec II 6		CDE113 Part III, 1
	Conn Corn Form 6	No Form No.	No Item No.			8	m	소
	Data Type	*EVALUATION OF SADC AND TITLE I PROGRAMS FOR FY 1971		criptive title of program, SADC amount approved, Title I amount approved)	lb. Source of program funds (Title I, SADC, jointly funded Title I and SADC)	2. Period of project (school year project only, sunmer project only, school year and summer project)	3. Names of public schools where children received the services of the program	*4. The number of staff members of the following classification whose total or partial salaries were included in

PROGRAM Compensatory Education F(2)

[1						
		Remarks					-	Conn. is narrative, any F/SS listed may be answer	,
		Category Breakout			Conn. Colo. F/SS	Conn. Colo. F/SS		F/SS, Conn.	Conn. Colo. F/SS
	Different	Time of Collection							
		Source or Level				F/SS Conn. Colo.		F/SS,. Conn.	
7274		Identical	~	·					
	Federal/	State Variable			CPIR, IV A1	88 -Pr Q8, 9, 18		ESS-Pu, Q16 ESS-Pu, Q17 ESS-Pu, Q18 ESS-Pu, Q19 ESS-Pu, Q20	CPIR, ID 1-8
		Colo Form & Item			CDE113 Part II I	CDE113 Part II I			CDE113 Part II I and CDE 33 2nd pg.8¢
		Conn Col			۶,	v	7.	∞	98 8
		Data Type	EVALUATION OF SADC AND TITLE I PROGRAMS FOR FY 1971 (Cont.)	the program budget (teacher, aide, ad- ministrator, special service, unpaid volunteers)	* 5. Unduplicated count of public school children served by this program	* 6. Unduplicated count of children served by grade level (PK, K, 1, 2, 12, other)	7. Duration (average hours per week per child, number of weeks	8. Criteria used to select children for participation	* 9a. Number of children (and the names of schools from which they came) from nonpublic schools who received services

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PROGRAM Compensatory Education F (3)

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Data Type	Conn Corn Form &	Colo Form & Item	rederal/ State Variable	Identical	Source or Level	ğ	Category Breakout	Remarks
EVALUATION OF SADC AND TITLE I PROGRAMS FOR FY 1971 (Cont.)								
9b. Describe these services (above)	96	CDE33,12B CDE34 PartII	CPIR, I [D 1-8				Conn.Colo F/SS	
9c. If these services were different from those for public school children, indicate the value of these services	o6							
* 10. Number of children who were (promoted to the next grade level at the end of the school year, not promoted)	10 a&b							
11. Aggregate days of attendance and aggregate days of membership	11 a&b		ESS-Di, Q29				F/SS, Conn.	F/SS simple no. of school days
*12. Number of grade 7-12 children who (withdrew, did not withdraw	12 a&b							
*13. Evidence based on test results of change in children this school year. Comparison of staff expected gain, loca and national norms and actual program gains (narrative)	14 is:	CDE113 Test results & Part V	888-Pu, Q40 888-Pu, Q40 888-Pu, Q41	७ ० न		•	Conn. Colo. F/SS	

PROGRAM Compensatory Education F(4)

					•			
			Federal/		3	Different		
Data Type	Conn Form & Item	Item Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
EVALUATION OF SADC AND TITLE I PROGRAMS FOR FY 1971 (Cont.)								
* 14. Evaluation of ob- jectives (objective activities, evalua- tive instrument, findings) (Narrative)	15	CDE113 Part		Colo.				
* 15. Description of (successful outcomes, and problems) other than those concerned with	16 & 17	CDE113 Part V					Conn. Colo	
16. Recommendations for the future consid- eration of this program								
Table I - Standardized Test Results for Title I and SADC Group Pre-Test Scores by Grade Level		,						
*17. Group designation, name of test, test subsection, form, month and year of administration, no. of children, grade level, mean raw score, mean grade equivalent score, median percentile score, number of students scoring at	Table I	CDE113 ESS - Pu, Q3 Test Results ESS Pu, Q4 ESS - Pu, Q4	ESS - Pu, 039 ESS - Pu, 040 ESS - Pu, 044		F/SS Conn. Colo.		Conn. Colo. F/SS	Some cells are identical, others not
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PROGRAM Compensatory Education F(5)

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PROGRAM Compensatory Education F(6)

F		r 			<u> </u>
	Remarks		F/SS no. of children		Since item is fill in, have listed possible answers from F/SS, however these talk about enrolled pupils not resident children
	Category Breakout		F/SS		F/SS Conn. Colo.
Different	Time of . Collection				
	Source or Lerel				.Conn. Colo. F/SS
	Identical		Conn. Co 1 o.	Conn. Colo	Conn. Colo. Conn. Colo. F/SS
Federal/	. 1		CPIR, IB		2SS-Pu, Q16 2SS-Pu, Q17 2SS-Pu, Q18 2SS-Pu, Q19 2SS-Pu, Q20 2SS-Pu, Q10
	Colo Form & Item		8	en	
	Conn Corn Co Form & Item Form &		7	м	4
	Data Type	APPLICATION FOR GRANT UNDER TITLE I OF PL89-10 AS AMENDED FOR FY,1972 (Cont.)	* 2. Type of enrollment (public schools (in applicant's district in other districts), institutional scho- ols for N&D, not enrolled in any school but eligible for enrollment, total number of children from low income families by (grade span, number of schools, number of children)	* 3. Concentration of children from low income families (district-wide percentage, average number per school attendance area)	* 4. Source of data used to determine the number of children from low income families

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PROGRAM Compensatory Education.

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	Remarks		F/SS only CPIR item different by level	F/SS only CPIR item different by level		F/SS at principal level does not dif- ferentiate public, non-public
	Category Breakout	•	F/S. Conn.Coio.	F/S Conn. Colo.		F/SS Conn.Colo
Different	Time of Collection					-
Д	Source or Level		Conn. Colo F/SS	Sonn.Colo, F/SS		Goen, Col. F/SS
	Identical		Conn.	Conn. Colo.	Conn.Colo	Conn.Colo
Federal /			ESS-Pr, Q7 ESS-Pr, Q10 CPIR-IB	ESS-Pr, Q7 ESS-Pr, Q10 CPIR-IB		BSS-Pr, Q8
•	Item		8A HB1295 (7)	28	94	11A CDE34 Part IIA HB1295(6)
	Conn Conn Form &		, YS	SB (3	No Item No.	9
		GRANT 7 PL89-10 7Y 1972	* 5. (Public school name) by (no. of children in school, no. of children residing in attendance areas (total, from low income families, percent))	6. (Private school name) by (no. of children in school, no. of children in school who live in project areas)	7. Whether participantsNo Item No. to be reported on are regular school term or summer term only	8. Grade level (PK, K, 1, 12, total) by participants (no. enrolled in public schools, no. enrolled in private schools, total)

PROGRAM Compensatory Education F(8)

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	Remarks		F/SS pupils not residents																		
	Category Breakout		F/SS Conn. Colo.																		
Different	Time of Collection																				
G L	Source or Level		F/SS, Conn. Colo.				ī														
	Identical		Colo.	Conn. Colo.																	
Fodons 1 /			11D1 ESS ~Pu,Q12 6D1)																		
	Colo Form & Item		CDE34F 11D1 HB1295(6D1)	CDE34G 11D2 Hb1295 (6D2)														_			
	Conn Corn Form &		681	.682	7			•					8	I							
	Data Type	APPLICATION FOR GRANT UNDER TITLE I OF PL89-10 AS AMENDED FOR FY 1972 (Cont.)	* 9. Number of children in district by ethnic group (A., Indian, Negro, Oriental, Spanish,	*10. Estimated number of children who will participate in Title I by ethnic group (same as above)	11. Kind of staff	(teacher, aide,	administrator,	volunteer) by eth-	nic group (same as	above) Note: cells	who will participate	in Title I	12. Information will be	ents, public, teach-	ers, administration,	other) by the fol-	(newspaper, confer-	ence, letters, meet-	ings, pamphlets, other)		

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PROGRAM Compensatory Education F(9)

	ry lt Remarks		,		010.	010	010.
	Category Breakout				Conn.Colo.	Conn. Colo	Conn.Colo.
Different	Time of Collection		,				
	Source or Level						
	Identical		Conn.Colo				
Federal/	State Variable						
	Colo Form & Item		14		15A3	15A4	15A1
	Conn Corm E	,	9A	88	26		9E
	Data Type	APPLICATION FOR GRANT UNDER TITLE I OF PL89-10 AS AMENDED FOR FY 1972 (Cont.)	13. Date parent council was established	14. Whether council members received free copies of (the act regulations, prior Title I applications criteria, current application, prior Title I evaluation, other)	15. Method of consulting and involving parents in planning (meetings, active participation in needs assessment, home-school coordination, other)	16. Whether parents have had an opportunity to present to appropriate school personnel, council has had opportunity to SEA	17. Description of procedures for selecting representative parents

PROGRAM Comper atory Education F(10)

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			Federal/	•	- 1	urrerent		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	I ::ntical	Source or Level	Time of Collection	Category Breakout	Remarks
APPLICATION FOR GRANT UNDER TITLE I OF PL89-10 AS AMENDED FOR FY 1972 (Cont.)								
18. Description of plans to continue involvement of parents	s 9F	, 15A5					Conn. Colo.	
19. Description of procedures used to inform and consult with parents whose children are to be served by Title I	8					·		
20. Description of procedures used to respond to complaints promptly.	н6	15A4	•	Conn.Colo	_	,	_	
CRITERIA FOR DEMONSTRATING NO Form NO COMPARABILITY FOR ESEA TITLE I - FY 1972	IG No Form No							
l. Applicant agency	No Item No.,	CDE 33		Conn.Colo				
2. Mailing address	No Item No	CDE 33		Conn.Colo				
3. Telephone No.	No Item No.	CDE 33		Conn. Colo				
4. Data submitted	No Item No.	CDE 94		Conn.Colo				
5. School district	No Item No.	CDE 41		Conn. Colo				
6. Grade span of schools listed	No Item No.	CDE 94		Conn. Colo.		-	_	
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Conn Form & Item	Colo m Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Rema rks
CRITERIA FOR DEMONSTRATING COMPARABILITY FOR ESEA TITLE I - FY 1972 (Cont)					,		
(Title I project No Item No. school individually average for non-	CDE 94	CPIR, I B and IIA	Conn.			F/SS Conn.	F/SS ratio of program participants to total
Title I schools) by (no. of pupils in ADM, average no.							
FTE certified class-room teachers, av-			•	_			
erage no. FTE other certified instruc-							
structional staff,				-			
ratio of pupils to	_						
room teachers, ratio		_					
instructional start; ratio of pupils to							
instructional staff,				•			
amount expended for instructional sal-				_			
expended for instruct							
cional salaries less longevity ner minil							
expense for instruc-							
salaries less						-	
longevity, amount ex-							
pended for other in-				_			

PROGRAM Compensatory Education F(12)

			Fedenal!		Ω	Different		
Data Type	Conn Form	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
CRITERIA FOR DEMONSTRATING COMPARABILITY FOR ESEA TITLE I - FY 1972 (Cont.)	<u>ي</u>							
per pupil expense for other instruc- tional costs)			·					
8. Name, title, and signature of authorized representative	No Item No.	CDE 94 CDE 41	.48%				Conn.Colo Conn.Colo.	·
OE FORM 4319 - ANNUAL FINANCIAL REPORT, TITLE I ESEA	OE 4319 No Item νω.	OE 4319 No Item No.						
Section A - State Admin-istration				•				
*1. Program function (general administration, departmental supporting services for LEAs, studyplanning-developing-and evaluating State	No Item No.	No Item No.	CPIR III A 1-8	Conn. Colo.	F/SS Conn. Colo.		F/SS Conn. Colo.	F/SS probably only general administration
educational programs leadership-consulta- tive-and technical								
services to LEAS for improvement of instruction, total) by (ner-	J						_	
sonnel, professional,								
salaries, professiona		•						
non-professional, con-	•			•				
vel, equipment, renta								
purchase, land and						_		
chase other expenses.				<u> </u>				
total expenditures)								

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PROGRAM Compensatory Education F(13)

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	Remarks				F/SS depending on which of the levels is specified in (3) some F/SS items may differ by level	
	Category Breakout				·	F/SS Conn.
Different	Time of .					
	Source or Lev l					
	Identical	,	Conn.Colo		Conn. Colo	Conn. Colo
7. 3. 4. 7.	reverai/ State Variable					A 1-8
	Colo Form & Item	OE 4319 No Item No	No Item No		No Item No	No Item No
	Conn Form & Item Form &	OE 4319 No Item No.	No Item No.		No Item No.	No Item No.
	Data Type	OE FORM 4319 - ANNUAL FINANCIAL REPORT, TITLE I ESEA (Cont.)	2. Certifying signature of head of SEA, date	Section B - Program Expenditure Report	3. A separate "Program is prepared of each of the following (LEA-low income areas SZA-migrant, State agency-handicapped, State agency-delinquent	4. Expenditure accounts (administration, salaries for instruction in-service education, text books, audio visual materials, school library books and all other library expenses, teaching supplies and all other expenses for instruction, attendance services, health services pupil transportation services, operation

PROGRAM Compensatory Education F (14)

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		Remarks		. ,
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		Category Breakout		A SA
	nt			No. of Particular Part
	Different	Time of Collection		3-7
	A	Source r Level	·	
		S _C	9	A Section 1
		Identical	Conn. Co Iv	A TO SAME
	Federal/	- 41		77/19/2
-	Fe	o. Item Va	No o	Primarie en
		Conn Colo	OE 4319 No Item No. No Item No.	
		n Item F		[connections]
		Conn	OE 4319 No Item No.	
		Fo	d o y 1 1 9 9 d a d d d d d d d d d d d d d d d d	
			- ANNUAL PORT, TITL plant, fix food ser- tudent bod es, commun including including tuition, tuition, tuition, tuition, tuition, constru ucational sual, all sual, all sual, all constru cational sual, all constru cational sual, all constru cational sual constru cational sual constru cational constru cational constru	THE STATE OF THE S
		Data Type	orm 4319 - ANNUAL (Cont.) of plant, mainten- ance of plant, fixed charges, food ser- vices, student body activities, community services including clothing, tuition, sub-total, construc- tion, educational rv. audio visual, all other instructional equipment, all non- instructional equip- ment, sub-total, grand total, total funds for summer program) by (salaries, con- tracted services and other expenses, total) ion C - Recapitula- iof all Title I Funds FY ending June 30 1970 Item (dollar amount amount expended, un- expended balance) by (state administration total, low income areas, migrant, handi- capped, neglected, delinquent)	1
		Da'	FORM NANCIA Of r of r ance chan vice action vice action clother service clother clothe	The Market
			ETTO S.	3 1

PROGRAM Compensatory Education F(15)

		<u> </u>					
	Remarks						
	Category Breakout						
Different	Time of Collection						
	Source or Level						
	Identical			Ćonn. Colo	Conn. Colo	Conn. Colo	
r f	rederal/ State Variable						
	Colo Form & Item	OE 4319 No Item No.		No Item No.	No Item No.	No Item No.	
	Conn Form & Item Form &	OE 4319 No Item No.		No Item No.	No Item No.	No Item No.	
	Data Type	OE FORM 4319 - ANNUAL FINANCIAL REPORT, TITLE I ESEA (Cont.)	Section D - Adjustment of Expenditures for FY ending June 30, 1969	6. Item (total expendinatures for FY ending June 30, 1969, adjustment to 1969 expenditures, net adjusted expenditures for 1969) by (state administration, low income areas, migrant handicapped, neglected delinquent)	7. Section E - Adjust- ment of Expenditures for Fy ending June 30, 1968 (same as Section D except for 1968)	8. Section F - Adjustment of Expenditures for FY ending June 30, 1967 (same as sections D&E except for 1967 and total column is added)	Section G - Adjustment of Expenditures for FY ending June 30, 1966

PROGRAM Compensatory Education F(16)

		sory cout Remarks				,						F/SS, Conn.
	Γ	Category on Breakout										
7. 5.5	Ulrerent	Time of Collection										Conn. Colo
		Source or Level	-									
		Identical		Conn. Colo	Conn.Colo							Conn. Colo
	Federal/	State Variable			_							CPIR III A 1-8
		olo & Item	OE 4319 No Item No.	No Item No.	No Item No.		-		-			CDE33(9A) 0.E.4319
		Conn Form & Item Form	OE 4319 No Item No.	No Item No.	No Item No.		No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	O.E.4319
		Data Type	OE FORM 4319 - ANNUAL FINANCIAL REPORT, TITLE I ESEA (Cont.)	9. Item (same as sections D, E and F) by (state administration LEAs, state agencies)	10. Comments	FORM ESEA 3 PART I TITLE I PL-89-10	1. School district	2. Project number	3. Authorized carryover	*4. Payments received 1970-71	*5. Total amount	*6. Expenditures by services provided (administration, salaries for instruction, inservice education, textbooks, audiovisual materials, school library books and all other library expenses, teaching supplies and all other other expenses for

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PROGRAM Compensatory Education F(17)

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Different	Time of Category Collection Breakout Remarks		·
Diffe	Source Tim		
 Federal/			
	Colo Form & Item		
	Conn Conn Form 6		No Item No.
	Data Type	다. 다른	7. Total project dis- bursements as of: June 30, 1971 and August 31, 1971

PROGRAM Compensatory Education F(18)

			7					
			Federal/		Α	Different		
Data Type	Conn Corn Form &	~ · · · · ·	(1)	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
FORM ESEA PART II								
8 and 9. The same as No. 6 and 7 except for project obligations instead of distoursements	No Item No.							
PART III - Facilities Disbursements								
10. Expenditures by materials (sites, professional services for cuildings, new buildings and building additions, remodeling, equipment for administration, equipment for community services)	No Item No. SA-1 and ap- plication for grant HB1295(H)					Conn. Colo.		
<pre>11. Total facilities dis- bursements as of (same as 7 above)</pre>	dis-No to mo.		_	•				
12 and 13. Same as 10 and 11 except for facilities obligations instead of disbursements	<i>o</i>							
PART IV - Fiscal Summary								
44. Total grant award	No Item No.	OE 4319			Conn.Colo			
15. Funds disbursed	No Item No.							

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PROGRAW Compensatory Education F (19)

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Data Tyne	Conn Form & Item	Colo Form & Item	Federal/ State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks
PART IV - Fiscal Summary (Cont.)								
16. Funds obligated	No Item No.							
.17. Total funds dis- bursed and ouligated	No Item No.							
18. Unouligated balance No Item No. (to be returned to SDE)	No Item No.			•				
19. Signature of super- intendent	super- No Item No.							
PART V				_	_			
20. Whether item has been purchased or ordered, description of item, and cost of item, total cost	No Item No.						,	
PART VI			<u>. </u>					
21. Signature of Super- intendent, assuring compliance with reg- ulations	No Item No.				·		_	
APPLICATION FOR GRANT		CDE 33						
1. Average per pupil expenditure from non-federal funds: for FY ending June 30, 1970, for FY								
cit (oc alle during								

PROGRAM Compensatory Education F(20)

		ory Remarks			.010.	Colo F/SS salary			Colo	.010.	
	ıt	of Category			F/SS, Colo.	F/SS, (F/SS, C	F/SS, Colo.	
	115ferent	e Time of el Collection				010					
-		Source al or Level				F/S3 Colo		·			
) } }	_	e Identical			-	54					
	Federal	State Wariable			518,18	ESS-Te, 024		[2]	CPIRII E 1-4	CPIR, II A, B, C,	
		Colo Form & Item	CDE 33	! 		10A		10B HB1295(5) CDE34PAKTII	10C HB1295(5) CDE34PARTIII	100	
		Conn Form & Item			.			.			
		Data Type	APPLICATION FOR GRANT (Cont.)	2. Whether cooperative project	*3. No. of children from low income families who will participate by public school, private school, total total from outside project area	4. Home of staff member by E/S, Program assignment, school to which assigned FTE	teguial teim, summer term) total estimated salary, amount of salary fund by Title I	5. No. of volunteers by parents, other adults youth, total	*6. No. of Title I staff to receive in-service training by teachers,	7. Type of personnel by regular term (full time, half time, less than half time, FTE) summer term (same)	

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PROGRAM Compensatory Education

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			Federal/	-	4	Different		
Data Type	Conn Form & Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
APPLICATION FOR GRANT (Cont.)		CDE 33						
*8. Estimated no of dropouts		11B HB1295(6B)			of the games			
*9. No. of handicapped by MR, hard of hearing, deaf, speech impaired, visually handicapped, emotionally disturbed, crippled, other health impaired, total		11C HB1295(6C)	ESS -Pu, Q11		F/SS Cold		F/SS Colo.	
10. No. of children who will participate by subject area by public school (grade 1-6, 7-12) private school (1-6, 7-12) total, no. from institutions for N & D estimated cost		12A CDE 34 PART II F	ESS -Pr, Q8, 9, 18		F/SS Colo.		F/SS Colo.	F/SS no public, non- public or N & D breakout
<pre>11. Equipment (quantity, equipment identifi- cation, objective no., unit cost, total cost</pre>		16		,				
APPLICATION FOR GRANT HB 1295		No Form No.						
 Certification of cooperating agencies 								
2. No. of children to participate from each cooperating agency		2						

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PROGRAM Compensatory Education F (22)

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			Federal/		£.	Different		
Data Type	Conn Corn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
APPLICATION FOR GRANT HB 1295 (Cont.)		No Form No.						
3. Amount of funds from each cooperating agency		e	·			-		
4. Staff assignments and salaries		4 CDE34PARTIIC		•				
ANNUAL EVALUATION REPORT OF PROGRAM ACTIVITIES ** I.D. Data		CDE113						
 Grade level included in project 		PART II A	ESS-Pr, Q8,9,18		F/SS Colo.		F/SS, Colo,	
*2. No. of children by services and grade		PART II G	CPIR, I D 1-8				F/SS, Colo.	
3. No. of students in Title I for 1,2,3,4, or 5 years		PART IIJ-M				-		
4. No. of boys, no. of girls in project		PART II N & O						
5. No. of students who participated the entire year		PART II P		-		_		
6. No. of citizens who participated without pay by activities and full time, part time		PART IIA2						
	1							

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PROGRAM Compensatory Education [123]

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at	Data Type	Conn Corn Form E	Lo Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ANNUAL EV <i>i</i> OF PROGRAN (Cont.)	ANNUAL EVALUATION REPORT OF PROGRAM ACTIVITIES (Cont.)		CDE113						
the roy	Whether the ethnic and racial composition of the staff approximates that of the student population	<u>u</u>	PART IIIA3						
Whether parent mittee	Whether project had parent advisory com- mittee		PARTII IA4A	ESS-Di, Q7 ESS-Di, Q8				F/SS Colo.	
mi	How were members of committee selected		PARTIIIA4B						
t fo mi	What activities were performed by the committee since June 1970		PARTIIIA4C	ESS-Di, Q9				F/SS Colo.	F/SS concerned with receiving proposals
re ne	List of members with addresses and tele- phone numbers		PARTIIIA4D						
E E	Minutes of committee meetings		PARTIIIA4E						
se irs	In-service training activities by no. of hours provided by type of personnel		PARTIIIB	ESS-Di, Q22 ESS-Di, Q21	, 23			F/SS, Colo.	F/SS two items
ing av	Change in student behavior		PARTIVA	ESS-Pu, 037		F/SS, Colo.		F/SS, Colo.	
o je	Froject outcomes		PARTIVB						
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PROGRAM Compensatory Education F (24)

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			Federal/		- 1	urrerent		
Data Type	Conn Corn Corn Corn Corn Corn Corn Corn	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ANNUAL EVALUATION REPORTS OF PROGRAM ACTIVITIES SB 174		CDE Form34				·		
Average per pupil expenditure excluding SB 174 federal fund		U	ESS. Di, Q3	F/SS Colo.				,
(no. of schools, no. of schools with participants) by elem., secondary, total		Q	ESS-Di, Qla ESS-Di, Qle				F/SS, Colo.	
School attendance centers that partici- pate in SB 174, ADA, October enrollment	•	មា						
Total allocation of funds, from SB 174	•	ж						
Expenditures for the program by category		н	CPIR III A1-8			_	F/SS, Colo.	F/SS 16 only
No. of high school graduates participa-ting in Title I and SB 174, in SB 174 and not Title I, in neither SB 174 or Title I	h	ט	_					
Length of project in months		PART II la		_				
Achievement test results		No Item No.	ESS-Pu, Q39 ESS-Pu, Q40 ESS-Pu, Q41	<u> </u>	F/SS, Colq.		F/SS, Colo.	
							_	

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Section Section

PROGRAM Compensatory Education F(25)

		r						 	
	Remarks								
	Category Breakout		F/SS, Colo.						
Different	Time of Collection			-			,		
	Source or Level		F/SS Colo.		_			 	
	Identical						~		
Federal/			ESS-Te, Q5		•	_			-
	Colo Form & Item	No Form No.	1 and 2						•
	Conn Co Form & Item Form &		g						
	Data Type	REPORTING FORM FOR SCHOOL DISTRICTS WITH CHILDREN FROM LOW INCOME FAMILIES AGES 5-17	1. No. of children whose families re- ceive welfare (aid for dependent children general welfare as- sistance), total						

MIGRANT PROGRAM

Migrant G(1) PROGRAM

			Federal/		Ď	Different		
	Conn				Source	Time of	Category	0 0 0 0
APPLICATION FOR PROGRAM GRANT	OE 4389 OE 4389			<u> </u>	_ 			ייבוומן
l. Applicant	(1)	(1)		Conn.Colo.				
*2. Amount Requested	(2)	(2)		Conn. Colo.				
Fiscal Year, ending	(3)	(3)		Conn. Colo.				
Total State Alloca- tion	(†)	(†)		Conn. Colo.				
State Application	(1)	(1)		Conn. Colo.				
Certification by State Education Agency	(9)	(9)		Conn.Colo.				
Certification of State Attorney General	(7)	(2)		Conn.Colo.	-			
Certification of State Education Agencies for Coopera- tive Inter-State Programs	8	(8)		Conn.Colo.				
State Administration of Title I Migrant Program	6)	(6)		Conn.Colo.	_			•
Professional Staff (names, percent of time, amount of salary, other total salary)	(94)	(94)		Conn.Colo.				
Non-professional Staff	(9B)	(9B)		Conn.Colo				

Source Time of Category or Level Collection Breakout Time of Different Source Migrant G(2) Conn. Colo Conn.Colo Conn.Colo Conn.Colo Conn.Colo Conn.Colo Conn Conn Colo State Form & Item Variable Identical Conn.Colo Conn. Colo State Federal/ PROGRAM (10A) (10B) (10C) (11A,B) OE 4389 (11) (10) (3C) (11A,B) OE 4389 (10C) (10B) (10A) (11) (10) (၁6) State Administration and Program Operations Administrative Per-Responsibilities of Responsibilities for Professional (names percent of time, salary from the 9C. State Organization-al Chart

Professional Staff Qualifications of

10C

in Program

Operations

11.

Personnel

*11A.

Non-Professional Staff

10B.

Title I money, others, total

salary)

Remarks

APPLICATION FOR PROGRAM GRANT (Cont.)

Data Type

Migrant Program Operations Staff

10.

10A.

Conn. Colo Conn.Colo (12A) (12) (12A) (12) of Migratory child-ren served in State by School Level Program Development Estimated numbers 12A. 12.

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PROGRAM Migrant

				G (3)					Γ
			Federal/		Di	Different			
Data Type	Conn Form & Item Form	Colo Form & Item	4	Identical o	Source or Level C	Time of Collection	Category Breakout	Remarks	
APPLICATION FOR PROGRAM GRANT (Cont.)	68£† 30	OE #383		Conn. Colo.					
12B. Describe State Program for Migra- tory Children	(12B)	(12B)		Conn.Colo.					
*12C. Involvement of LEA's	(12C)	(12C)		Conn.Colo.					
13. Areas to be Served (Map of agricultural areas, and possible migrant education programs)	(134,8)	(13A,B)		Conn.Colo.					
*14. Program Coordination	(14)	(14)		Conn.Colo.					
14A. Intrastate (Coordination of funds and services with other agencies	(144)	(14A)		Conn.Colo.					
<pre>14B. Interstate (Continuity of instruction services; in-service training)</pre>	(14B;1,2)	(14B;1,2)		Conn.Colo.					
15. Non-public Schools Services	(15A)	(15A)		Conn.Colo.					<u> </u>
<pre>16. SEA and LEA staff development (In-service training duties)</pre>	(16A)	(16A)		Conn. Colo.					
#17. Evaluation (Agency that evaluates effectiveness of State Program)	(17) tes ate	(17)		Conn.Colo.		•		·	

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Migrant G(4) PROGRAM

Γ									<u> </u>
		Rema rks							
		Category Breakout					F/8S		
	Different	Time of Collection							·
		Source or Level					F/SS		
		Identical	Conn.Colo	Conn.Colo	Conn. Colo	Conn.Colo	Conn.Colo	Conn. Colo	Conn. Colo
	Federal/						CPIR,IV A2		
		Colo Form & Item	OE 4389	(18)	(19A)	(20)	(20A)	(20B)	(21)
		Conn Corn Form &	OE 4389	(18)	(19A)	(20)	(20A)	(20B)	(21)
		Data Type	APPLICATION FOR PROGRAM GRANT (Cont.)	*18. Dissemination of Information	19. Fiscal and Audit Procedures (State schedule for accounting and auditing)	20. Program Statistical Estimate	20A. Regular School Term (Intra- and Inter- State by number of children '70,'71,	20B. Summer School Term (Intra- and Inter- State by average number of school days by number of children '72)	21. Program Statistical Estimate (Managemant function by objects of expenditure by totals)

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PROGRAM Migr

Migrant ((5)

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Data Type	Conn Corn Form &	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Rem arks	-
UDIES	OE 4389-	OE 4389-		Conn.Colo					· —
<pre>l. New and continuing contract activities to be submitted</pre>	(1)	(1)		Conn.Colo		-	_		
*2. Name the Contracting Agency	(2)	(2)		Conn.Colo					
3. Organization to conduct study or survey	(3)	(3)		Conn. Colo					
4. SEA Official	(ħ)	(†)		Conn.Colo					
5. Dates	(5)	(5)		Conn.Colo			_		_
6. Amount of Title I Migrant Program Funds for Surveys	(9)	(9)		Conn.Colo					
7. Inter-State Contracts	(7)	(7)		Conn.Colo					
8. Objectives	(8)	(8)		Conn.Colo	_				
%9. Dissemination of findings	(6)	(6)		Conn.Colo					
10. Results of prior Contracts	(10)	(10)		Conn.Colo					
ll. Use of result of prior Programs	(11)	(11)		Conn.Colo	_				
CONSTRUCTION AND REMODELING (Stringent guidelines and questions listed to justify construction as well as costs, dates)	OE 4389-2	OE 4389-2		Conn.Colo					

PROGRAM

Migrant G (6)

	Remarks									OE requires a complete description of each of the items in 8A-EH F/SS some items appearing in OE 4389-3 narrative may appear on F/SS items				
	Category Breakout							F/SS			F/SS			
Different	Time of Collection	-						·						
	Source or Level										F/SS	F/SS		
	Ideņtîcal	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo		Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	CPIR, IIE Conn. Colo	
Federal/	-							CPIR IV A2			CPIR. ID 1-8	CPIR, ID 1-8	CPIR,IIE	
	Colo Form & Item	OE 4389-3	(1)	(2)	(3)	(†)	(2)	(9)	(7)	(8)	(8A)	(88)	(38)	
	Conn Form & Item	OE 4389-3	(1)	(2)	(3)	(4)	(5)	(9)	(7)	(8)	(8A)	(88)	(8C)	
	Data Type	PROJECT SUMMARY	l. Amount Requested	2. Title	3. Type of Application	4. Direct or Indirect Administration of Project	5. Project Area	6. Estimated numbers of Migrant children by ievel by inter-and intra-state	7. Regular or Summer Term	8. Description of Project Activity and Service	8A. Instr tional Areas	8B. Supportive Services	8C. In-Service Training	

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Migrant G(7) PROGRAM

	Remarks												
	Category Breakout				F/SS	-				F/SS	F/SS	F/SS	
Different	Time of Collection									•.			
	Source or Level				F/SS					F/SS	F/SS	F/SS	
	Identical	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	CPIR,IIIA Conn,Colo	
) Lange	State Variable				ESS-Di,Q7 ESS-Di,Q8 ESS-Di,Q9 ESS-Di,				CFTR,IIIA 1-8	CPIR, IIIA	CPIR,IIIA 1-8	CPIR,IIIA 1-8	
	Colo Form & Item	OE #368-3	(8D)	(8E)	(8F)	(98)	(8H)	(6)	(10)	(10;1,2)	(10;3)	(10;4)	
	Conn Form & Item	0E #389-3	(8D)	(8E)	. (8F)	(80)	(нв) ч	6	(10)	(10;1,2)	(10;3)	(10;4)	
	Data Type	PROJECT SUMMARY (Cont.)	8D. National Student Record Transfer System	8E. School/other facilities to be used	8F. Parental and Community involvement	8G. Number and types of aides	8H. Plans for evaluation	<pre>% 9. Project Staff Members (Position, salary, duties)</pre>	10. Budget	10A. Administration	10B. Attendance	 10C. Health 	

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PROGRAM Migrant

Remarks Category Breakout F/SS F/SS F/SS F/SS F/SS F/SS F/SS F/SS F/SS or Level Collection Time of Different Source F/SS F/SS F/SS F/SS F/SS F/SS F/SS F/SS F/SS CPIR, IIIA Conn. Colo CPIR, IIIA Conn. Colo 1-8 CPIR, IIIA Conn. Colo CPIR, IIIA Conn. Colo CPIR, IIIA Conn. Colo 1-8 CPIR, IIIA Conn. Colo 1-8 CPIR, IIIA Conn. Colo CPIR, IIIA Conn. Colo 1-8 CPIR, IllA Conn. Colo Form & Item|Form & Item|Variable |Identical Conn.Colo Conn.Colo Conn.Colo G(8) Federal/ OE 4398-3 Colo(11 A-C) (10;11) (10;01) (10;12)(10;15)(10;5) (10;6) (10;1) (10;8) (10;8) (12)OE 4389-3 Conn Equipment, Materials (11 A-C) and Supplies (10;10) (10;12) (10;11)(10;15)(10;1) (10;8) (10;8) (10;2)(10;0) (12)Transporta-10J. Community Services PROJECT SUMMARY (Cont.) (Item, quantity,
cost; grand total) Equipment (Explanation of other expenses) 10K. Capital Outlay 10G. Fixed Charges 10H. Food Service 101. Student Body Activities 107. Maintenance 10L. Grand Total 10E. Operation 10D. Pubil tion 11. 12.

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PROGRAM

Migrant G(9)

	Remarks						The items in the expenditure sheet are included below in "Annual Financial Report" comparison with CDE 71			
	Category Breakout									
Different	Time of Collection									
	Source or Level									
	Identical	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo
Federal/	State Variable				, -					
	Colo Form & Item	OE 4319	Section A	No Item No.	No Item No.	Section B	No Item No.	No Item No.	Section C	No Item No.
	Conn Form & Item	OE 4319	Section A	No Item No. No Item No	No Item No.	Section B	No Item No.	No Item No.	Section C	No Item No.
	· Data Type	ANNUAL FINANCIAL REPORT	1. State Administration	<pre>lA. Program function - category by object of expenditure</pre>	<pre>1B. Certifying signa- ture of head of SEA, date</pre>	2. Program Expenditure Report	*2A. A separate "Program No Item No. Expenditure Report" is prepared of each of the following (LEA-low income areas, SEA-migrant, State agency-handicapped, State agency-handicapped, State agency-delinquent)	*2B. Expenditure accounts by type of expendi- No Item No. No Item No ture	3. Recapitulation of all Title I Funds for FY ending June 30, 1970	3A. Item by target on expenditure

PROGRAM

Migrant G (10)

			Federal/		a	Different		
Data Type	Conn Con Co Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ANNUAL FINANCIAL REPORT	OE 4319	OE 4319		Cenn.Colo				
4. Adjustment of Expenditures for FY ending June 30, 1969	Section D	Section D		Conn.Colo				
4A. Item by target on expenditures	No Item No. No Item	No Item No.		Conn.Colo				_
5. Adjustment of Expenditures for FY ending June 30, 1968 (same as 4, except for 1968)	Section B	Section E	,	Conn.Colo				
6. Adjustment of Expending ditures for FY ending June 30, 1967 (same as 4, and 5. except for 1967 and total column is added)	Section F	Section F		Conn.Colo				
7. Adjustment of Expending ditures for FY ending June 30, 1966	Section G	Section G		Conn.Colo	-			
7a. Item (same as 4., No., 2., and 6.) by (State administration, LEAs, state agencies)	No Item No.	No Item No.		Conn.Colo				
8. Comments	e. ط	ъ. д.						
APPLICATION FOR GRANT	Application for Grant	CDE 67						Colorado's form is specifically for Migrant Students
%l. I.D. Data	(1)	Section II		Conn.Colo			-	

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PROGRAM M:

Migrant G(11)

	Remarks		Number of schools	entirely fill in matrix on form			Since item is filled	in, have listed possible answers from F/SS. however, these talk about enrolled pupils not resident children			
	Category Breakout		F/SS				F/SS	Conn. Colo			
Different	Time of Collection										
	Source or Level						F/SS	colo.			
	Identical		Conn.Colc		Conn.Colo		Conn.Colo				
Federal/	State		ESS-Di,	oTo			ESS-Pu,	Q16 ESS-Pu, Q17 ESS-Pu, Q18 ESS-Pu, Q19 ESS-Pu, Q20 ESS-Pu,			ESSDi,
	Colo Form & Item	Cuž 67	(2)		(3)		(†)	·	(5)	(9)	(7)
	Conn Form & Item	Application for Grant	(2)		(3)		(†)				
	Data Type	APPLICATION FOR GRANT (Cont.)	No. of schools and 2. school age children	res ding in district as of Fall (kinds of schools and totals)	enrolled and not enrolled in schools * 3. Concentration of	<pre>children - Low income families (District wide and average no. per school)</pre>	4. Source of data to	determine no. of low income families	5. Title of Project	6. School Term covered by Application	7. Is it cooperative

PROGRAM Mig

Migrant G(12)

			Fodons1 /		1	Different		
Data Type	Conn Form & Item	Item Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
APPLICATION FOR GRANT (Cont.)	Application for Grant	CDE 67						
8. Eligible Attendance Areas								
8A. Location of activities - no. of chil-	(5 A)	(3 A)	ESS-PR, Q7		F/SS		Conn.Colo.	Connecticut - Name of school, by total
<pre>dren to participate (Public Schools No. of children)</pre>			CPIR, IB					
								school by ho. or children participat- ing in activities
8B. Private Schools serving children	(S B)							
9. Participants by grade level, by no.	(6 A)	(11 A+B)	CPIR, IV Al	,	F/SS		Conn.Colo. F/SS	F/SS Title I partici- pants by grade
total system requirements of summer			08,9,18			,		colorado does not pro- vide a public vs pritate school break-
								down but includes numbers of ungraded,
10. Resident children by Ethnic Group and	(6 B)	(3 11)					Conn.Colo.	Colorado include white specifically -
number participating								but Connecticut does not
<pre>11. Estimate number of staff participating (Position by ethnic group)</pre>	(7)	(10 D)					Conn.Colo.	Colorado is much more specific listing positions by fall or summer time and by
								full or part-time
							-	

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Provide Provide American

PROGRAM

Migrant G (13)

		Remarks				Colorado lists names of members on coun- cil, the school re- presentative and specific meeting dates				This entire form requires narrative descriptions of each of the questions
		Category Breakout				Conn.Colo.	F/SS Colo.	F/SS Colo.	F/SS Colo.	
	Different	Time of Collection	n.							
	Ω	Source or Level								
,		Identical								
	Federal/						CPIR IIIA 1-8	CPIR-ID 1-8	CPIR-ID 1-8	
		Colo Form & Item	CDE 67	(10 A,B,C)		(14 A,B) (15 A,B)	(6)	(12 A)	(12 B)	Part II
•		Conn Form & Item Form	Application for Grant		(8)	(9 A-H)			- e	6 88
		Data Type	APPLICATION FOR GRANT (Cont.)	12. Name of staff by position, by school, by salary for Migrant Program	13. Dissemination of information to different groups	<pre>14. Parential Involve- ment (Council data, kinds of activities; procedures, plans, information and complaints)</pre>	15. Expenditures (Annual Budget) [by fall, spring, summer]	16. Instructional Activities (Courses by grade by semester by cost)	17. Supportive Services by number of children it cost	Planning Activities for Migrant Ed Program (Groups involved, needs, overall goals, activities, evaluation)

Migrant G(14) PROGRAM

	Remarks			One is in terms of school year or summer, the other in				Colorado data is on Project Plan Connecticut is number of staff for evalua- tion purposes	Information identical but embedded F/SS estimate	Identifical but embedded, missing Kindergarten, F/SS	estimate of total, F/SS total only	Colorado number of months	·
				One i	teri		_	Color Pro- Conn of t		<u>н</u>	est F/SS		
	Category Breakout	Conn Colo							Conn.Colo. F/SS	Conn.Cc 'o. F/SS		Conn.Colo.	
Different	Time of Collection					-		Conn.Colo.	Conn.Colo				
	Source or Level									F/SS			
	Identical								Conn.Colo F/SS	Conn.Colo			
Podowal	State Variable								CPIR-IB	CPIR-IB or	ESS -Pr Q8,9,18		
	Colo Form & Item	CDE 120				IID		CDE 67 (1CA 10D) CDE 120 (III A1)	11A/CDE120 CPIR-IB	114		IID	
	Conn Corn Form &	Evaluation Form	No Item No.	(1)		(2)	(3)	(#)	(5)	(9)		(7 A,B)	
	Data Type	EVALUATION OF SADC - TITLE I PROGRAMS	*1. I.D. Data	2. Source of Program Funds		2A. Period of Project	3. Name of Public Schools	"4. Number of staff members whose salaries are in budget and (volunteers)	*5. Number of children (public school)	<pre>*6. Children by grade level</pre>		7. Duration of Project (hours + weeks)	·

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PROGRAM

Migrant G(15)

		Remarks		Connecticut is narrative, any F/SS		Colorado can get total number of non-public, may be able to get some services by subtracting public from total by services Connecticut narrative F/SSlisting of services		F/SS simple number school days	,	
		Category Breakout		F/SS Conn		F/SS		F/SS Conn.		•
); Efonon+	Direrent	Time of Collection								
	- 1	Source or Level		F/SS Conn			_			
		Identical					,			
	Federal/	State Variable		ESS-Pu, Q16	CSS-Pu, Q17 ESS-Pu, Q18 ESS-Pu, Q19 ESS-Pu, Q20	CPIR, ID 1-8		ESS-Di,		
		Conn Colo	CDE 120			I II				
		Conn Form & Item	Evaluation Form	(8)		(9 A,B,C)	(10 A,B)	(11 A,B)	(12 A,B)	
		Data Type	EVALUATION OF SADC- Evaluation TITLE I PROGRAMS (Cont.) Form	8. Criteria to select (economic +	education)	<pre>% 9. Number of schools + children in non- public schools + services received</pre>	*10. Number of children . promoted + not promoted	ll. Aggregate days of attendance + aggregate days of membership	*12. Number of grade 7-12 youth who withdrawn + remained in year	

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PROGRAM Migrant

Connecticut narrative Connecticut narrative school evaluation by objective of program Connecticut requires community relations identical, others Colorado school Some cells are effectiveness Remarks not Conn.Colo. Conn.Colo. Conn. Colo. Conn Colo State Source Time of Category
Form & Item Variable Identical or Level Collection Breakout Time of Different Source F/SS Conn Colo Conn.Cold G (16) State Federal/ ESS-Pu, 039 ESS,Pu, 040 ESS-Pu, 041 CDE 120 IVC CDE 67 Part II CDE 120 IVB CDE 67 Part II (A-F) CDE 120 coloMigrant Form Uniform S1-P8 IVC 모 Evaluation Conn Migrant Form (13) and Uniform (14) (15) (16) (11) S1-P8 (18) EVALUATION OF SADC- Evalue TITLE I PROGRAMS (Cont.) Form 乊 Evaluation (objective projects instrumentfindings) UNIFORM MIGRANT STUDENT TRANSFER FORM parent + enrollment *14. Narrative essay on gain made by pro-18. Recommendation for (Group pre + post test scores and gram children vs others Standarized Test 16. Other successful 17. Problems in town 2. Name of school + Data Type 1. Student I.D. outcomes Results rating future date 15. *13.

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PROGRAM Migra

Migrant G(17)

					-	Di ffenent		
	Conn	Colo			11	Time of	Category	
Fol	Form & Item Form	& Item	Variable	Identical	or Level	Collection	Breakout	Kemarks
UNIFORM MIGRANT STUDENT UNIFANSFER FORM (Cont.) Mi	Uniform Migrant Form	Uniform Migrant Form		Conn.Colo				
# 	н1-н6	H1-H6						
Immunization + Un For	Uniform Form	Uniform Form						
Testing Information T	T1-T6	T1-T6						
Academic character- Ristics (Reading, oral, achievement)	R1-R4	R1-R4		Conn.Cold				
Special Interests + Wabilities (Creative, science, reading, sports)	W.1-W4	MI-W4		Conn.Cold				
NDANCE REGISTER Name of child, sex, grade, age, date of		CDE 62	ESS-Pu, Qla,b ESS-Pu, O2 ESS-Pu, Q3b ESS-Pu, Q4 ESS-Pu, Q4		r/ss		F/SS Colo.	No available Connecticut form by pupil - F/SS will observe but not all cells
parent info., and attendance by school district by term								

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PROGRAM Migrant

						1,660000		
			Federal/		→ [Dirrerent		-
Data Type	Conn Corn Form 6	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Rem arks
ANNUAL FINANCIAL REPORT	OE 4139	CDE 71			Conn. Colo.		F/SS	Connecticut data on OE form is for entire
								State and is filled out for each Title I
·								Program
								Colorado is by each school district and
								is only for Migrant
								Frogram F/SS will fill some
4 4		, o			:			
"1. 1.D. data ror District		(7+5)						
*2. Expenditures	(A)	(A)		•	=			
*2A. Salaries	(1A)	(1A)			=			
*2B. Inservice Ed.	(1B)	(1B)			=			
*2C. Textbooks	(10)	(10)			=			
*2D. Audiovisual Materials	(1D)	(10)	-		=			
*2E. School Library	(IE)	(1E)			=			
*2F. Technical Supplies	(1F)	(1F)			=			
*2G. Attendance Services	(3)	(6)	CPIR IIIA 1-8	- 0.0	Conn Cold		F/SS	
*2H. Health	(†)	(±)	CPIR IIIA 1-8	00.	Conn Cold			

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PROGRAM

Migrant G (19)

Para Type Coun					(4.1.9.)				
Data Type Coan State State Source Time of Collection Dreakout t.) FINANCIAL REPORT (5 439) CDE 71 Time of Collection Dreakout F/SS t.) Transportation (5) (6) (7) CPIR 1-8 " F/SS Poperation of Plant (6) (6) (7) (7) CPIR 1-8 " F/SS Speration of Plant (7) (7) CPIR 1-8 " F/SS Maintenance (7) (7) CPIR 1-8 " F/SS Fixed Charges (8) (8) CPIR 1-8 " F/SS Food (10) (11) (11) (11) (11) " F/SS Sub-total (12) (12) (12) (12) " F/SS Contractional Equipment (14) (14) (14) (14) " F/SS Fortal (15) (15) (15) (15) (15) (15) (15) (15) <th></th> <th></th> <th></th> <th>Federal/</th> <th></th> <th>1</th> <th>ifferent</th> <th></th> <th></th>				Federal/		1	ifferent		
Description Form 5 Item Variable Identical or Leval Collection Breakout		Coun	Colo	State		Source	Time of	Category	
FYSS CPE 71 CPINANCIAL REPORT CP 4139 CPE 71 CPINA CPINA		Form & Item	Form & Item	Variable		or Level	Collection	Breakout	Remarks
Transportation (5) (5) CPIR 1-8 Conn F/S5 Operation of Plant (6) (6) CPIR 1-8 " Maintenance (7) (7) CPIR 1-8 " Fixed Charges (8) (8) CPIR 1-8 " Fixed Charges (8) (9) CPIR 1-8 " Food (9) (9) CPIR 1-8 " Food (10) (10) COIN. Community Service (11) (11) " Sub-total (12) (12) " Contraction, Instr- 4 Non-instructional equipment (14) (14) " Total (15) (15) " Total (15) (15) "	ANNUAL FINANCIAL REPORT (Cont.)	OE 4139	CDE 71						Conn and Colo remarks same as above
Operation of Plant (6) (6) (7) CPIR 11IA 1-8 " Maintenance (7) (7) CPIR 11IA 1-8 " Fixed Charges (8) (8) CPIR 11IA 1-8 " Frod (9) (9) CPIR 11IA 1-8 " Food (10) (10) CPIR 11IA 1-8 " Community Service (11) (11) " Sub-total (12) (12) " Contraction, Instructional Equipment 4 Non-instructional Equipment 5 Contraction, Instructional Equipment 6 Contraction, Instructional 6 Contraction, Instructional 6 Contraction, Instructional 6 Contraction (14) " Sub-total (14) (14) " Total (15) (16) "	%21. Transportation	(5)	(5)	CPIR IIIA 1-8		Conn F/S		F/SS	
Maintenance (7) CPIR 111A 1-8 " Fixed Charges (8) (8) CPIR 111A 1-8 " Food (9) CPIR 111A 1-8 " Student Body (10) CPIR 111A 1-8 " Student Body (10) CPIR 111A 1-8 " Community Service (11) (10) " Contraction, Instructional Equipment (12) (12) " An on-instructional equipment (14) (14) " Total (15) (15) " Total (15) (15) "	*2J. Operation of Plant	(9)	(9)	CPIR IIIA 1-8		.		F/SS	
Fixed Charges (8) (8) CPIR IIIA Lod Food Student Body Community Service (11) (10) COn. Community Service (11) (11) " Sub-total Contraction, Instr- uctional Equipment + Non-instructional equipment Sub-total (14) (14) (14) (15) " Total		(7)	(7)	CPIR IIIA 1-8		:		F/SS	
Food (9) (9) CPIR " IIIA IIIA 1-8 Conn. Student Body (10) (10) Conn. Community Service (11) (11) " Sub-total (12) (12) " Contraction, Instr- total (13) (13) " Contraction, Instr- ton-instructional equipment + Non-instructional equipment " Sub-total (14) " Total (15) "	*2L. Fixed Charges	(8)	(8)	CPIR IIIA 1-8				F/SS	
Student Body (10) .(10) Activities (11) (11) Community Service (11) (12) Sub-total (12) (12) Contraction, Instructional actional Equipment (13) (13) + Non-instructional equipment (14) (14) Sub-total (14) (14) Total (15) (15)	#2M. Food	(6)	(6)	CPIR IIIA 1-8		=		F/SS	
Community Service (11) (11) Sub-total (12) (12) Contraction, Instructional equipment (13) (13) + Non-instructional equipment (14) (14) Sub-total (14) (14) Total (15) (15)		(10)	(10)			Conn.			
Sub-total (12) (12) Contraction, Instructional uctional Equipment + Non-instructional equipment (13) + Non-instructional equipment (14) Sub-total (14) Total (15)	*20. Community Service	(11)	(11)			=			
Contraction, Instr- uctional Equipment + Non-instructional equipment Sub-total Total (14) (15)		(12)	(12)			=			
Sub-total (14) (14) Total (15) (15)		(13)	(13)	•		=			
Total (15) (15)		(14)	(14)			=			
		(15)	(15)			:			-

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PROGRAM

Migrant G(20)

	Remarks	Conn and Colo remarks same as above				Colorado requires school districts to submit Quarterly	Keports: expenditures by quarter and funds needed for next quarter				
	Category Breakout	Ö "				8 " " "					
Different	Time of Collection										
	Source or Level	Conn. Colo.		Conn. Colo.	Conn. Colo.				_		
	Identical										
Federal/	State Variable										
	Colo Form & Item	CDE 71	B P. 2	(C 1-6)	p. 2	CDE 69	CDE 68	CDE 73	CDE #8	CDE 70	CDE 72
	Conn Corn Co	OE 4139	Д							F. D	on,
	Data Type	AWNUAL FINANCIAL REPORT (Cont.)	* 2T. Summer Program Expenditure	<pre>* 3. Funds approved, received, cash on hand</pre>	* 4. Certification	ESTIMATED REQUIREMENT OF FUNDS - QUARTERLY REPORT	PLANNED EQUIPMENT PUR- CHASES FOR FISCAL YEAR FOR MIGRANT PROGRAM	RECORD + REPORT OF LOCAL EXPENDITURES (Expenses by item, and payment made)	REQUEST TO TRANSFER FUNDS WITHIN MIGRANT BUDGET (Items, amount, and justification)	REVISION OF MIGRANT BUDGET (Lists original + revised figures by category)	EQUIPMENT INVENTORY (once a year - item, description, location and original cost)

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PROGRAM

Migrant G (21)

			Federal/		D	Different		
	Conn	010			_	Time of	Category	
Data Type	Form & Item Form (: Item	Variable	Identical	or Level	Collection	Breakout	Remarks
VISITATION REPORT	CDE 57							Connecticut offered no corporate form
1. Program Information (money-number of pupils, etc.)	н							
2. Student Information	II							
Classroom Visits (include Evaluation)	III							
4. Supervisory + other Personnel	ΛI						•	
5. Facilities	۸							
6. Materials + Equipment	IA							
7. Suppos ave Services	VII							
8. Summary (Strengths, weak- nesses + suggestions for improvement)	ю ф							
LOCAL DIRECTOR VISITATION REPORT (made by LEA Director)	ON CDE 57A							Essentially this form contains in an abbreviated manner the information on CDE 57
CERTIFICATION FOR PARTICIPATION IN CO-OP PROGRAM (meetings + agency)		Certifica- tion Form						
PARENT PERMISSION FORM		CDE 60				_		

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PROGRAM Mi

Migrent G(22)

		=	Federal/		A	Different		
Data Typ€	Conn Form & Item	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
FAMILY CONTACT INTERVIEW REPORT		CDE 61						
l. Parents names and address								
Names and ages of children								
Special interests of parents								
Special problems			ESS, Pu, 07	<u>-</u>	F/SS		F/SS	Colorado na titive (F/SS list elements found in narrative
Immediate needs								
First contact (action taken)								
Subsequent contact (action taken)								
Comments of interviewer								
ANNUAL EVALUATION REPORT OF PROGRAM ACTIVITIES		CDE 120		•				
Identification, certification and approval		I AGB			_			
Grade level in pro- ject K-12,1-12,K-8, 1-8,K-6,1-6,1-4, others		II A	SES.Pr 08,9,18				F/SS	F/SS total and by grade for Title I

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PROGRAM

Migrant C(23)

				(12.0)				
			Federal/		Ω	Different		
	Conn				_	Time of	Category	
Data Type	Form & Item Form		8 Item Variable I	Identical	or Level	Collection	Breakout	Rem arks
ANNUAL EVALUATION REPORT OF PROGRAM ACTIVITIES (Cont.)		CDE 120						
3. Number children		II C	CPIR, IC				F/SS	F/SS doesn't have total
enrolled regular, summer,total			CPIR, IB				F/SS	F/SS estimate total can be found here
*4. Number children residing in district by ethnic or racial characteristics (American Indian,		3 II						
Black, Hispano, Oriental, White, Other, Total)								
%. Number of children participating in Title I by ethnic or racial as above		11 F						
%. Direct Education Services by grade category		II G	CPIR, ID				F/SS	F/SS grade category, not same breakout
 Supporting pupil services by grade category 		H II	CPIR, ID				F/SS	F/SS grade category, not same breakout
8. Number participating children by grade level by public, nonpublic, N&D institution, total, except total public		I II	ESS-Pr Q8,9,18		F/SS		F/SS, Colo.	F/SS only grade level
9. Number students in Title I 2,3,4,5,yrs		M-D II						

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PROGRAM

Migrant G(24)

								1
			Federal/		1	Different		
Data Type	Conn Form & Item	Colo Form & Item		Identical	Source	Time of	Category	a de marco
ANNUAL EVALUATION REPORT OF PROGRAM ACTIVITIES (Cont.)	+	CDE						o v. Tuliu T. Vo
10. Number of: boys girls		II N-0						
11. Number of children participating the entire year		II P						
<pre>12. Number of paid staff participating Title I type by full, half- time, etc.</pre>		III.Al	CPIR II,	F/SS			F/SS	F/SS adds breakdown by school term
13. Number of non-paid participating citizens actually by full, half-time, etc.	S)	III A2						
<pre>14. Does ethnic and race of staff approximate that of Title I children</pre>		III A3						
15. Was there an advisory committee		III A4A E	ESS, DI-Q7 F/SS, Colo	F/SS,Colo				
<pre>16. How were members selected (list)</pre>		III A4B				_		
17. Which activities did they do (list)		III A4C	ES3,Di,Q9 F/SS,Colo	F/SS,Colo				
18. List of members		III A4D		_	_			
19. Minutes of meetings		III A4E						

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Migrant G(25) PROGRAM

ANNUAL EVALUATION REFORT OF PRCTRAM ACTIVITIES (Cont.) 20. Inservice training conducted last 2 yrs teachers, other professionals, sub: ESEA Title I funds, total number hours a. Training of new techniques; math, reading, English, Science, Social Studies, occupations familiar, other academic b. Training and new techniques; diagnosis of problem, individual instruction and manage.ment, other manage.ment, other c. Training or new techniques; academ- IIII B C. Training or new techniques; academ-
ically disadvantaged, social economically disadvantaged, academically gifted pupils from

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PROGRAM

Migrant G(26)

		τ					 	
	Remarks			A few extra categories in F/SS				
	Category Breakout			F/SS Colo.				
Dirrerent	Time of Collection							
	Source or Level			F/SS Colo.	×			
	 Identical							
Federal/	State Variable			ESS _Pu Q37				
	Colo Form & Item	CDE 120	III Bc	IV A	IV B	IV C		
	Conn Corn Form &							
	Data Type	ANNUAL EVALUATION REPORT OF PROGRAM ACTIVITIES (Cont.)	c. (Cont.) non-dominate English homes, poten- tial dropouts, emo- tional and mentally handicapped, migrant, neglected and delin- quent, physical handi- capped, minority	#21. Degree of change by student behaviors	22. Ranking of project outcomes (except school, community, social service, coop	23. Less results amount of change total number hours children were involved		

DRIVER EDUCATION PROGRAM

Driver Education H(1) PROGRAM

			Fedenal /		D	Different		
	Conn	Colo	State		_	Time of	Category	
Data Type	Form & Item Form & Item	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks
GRANT APPLICATION (Public Schools)	ED 024							
*Town Name	No Item No.							
Street	No Item No.				<u> </u>			
Town Zip Code	No Item No.							
Superintendant Signature	No Item No.							
Date	No Item No.							
Superintendant Name	No Item No.							
Town	No Item No.							
Notary	No Item No.							
*Number of Students completing Driver Ed classroom phase	No Item No.	CDE Form 2 Sec. III Part A,#3; Part B,#3			Conn. Colo. Part B	Conn.Colo.	Conn.Colo.	One is enrolled, one is completed
*Number of Students completing Driver Ed behind the wheel phase	No Item No.	CDE Form 2 Sec. III Part A,#4; Part B,#3			Conn. Colo. Part B	Conn.Colo	Conn.Colo	One is enrolled, one is completed; one is behind the wheel, one is on the street
		CDE Form 2 Sec. III Part A,#7; Part B,#7			Conn. Colo. Part B	Conn.Colo.	Conn.Colo.	CDE item approximates the total of two Conn. items

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PROGRAM

Driver Education :(2)

			Federal/		А	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
GRANT APPLICATION (Non-Public Schools)	ED 039							
*Principal	No Item No.							
School Name	No Item No.				-			
Street	No Item No.							
Town Zip Code	No Item No.			_				
Principals Signature	No Item No.						-	
Date	No Item No.							
Principals Name	No Item No.							
Town	No Item No.						,	
Notary	No Item No.							
*Number of Students completing classroom phase	No Item No.							
*Number of Students completing behind the wheel phase	No Item No.							
APPROVAL OF SECONDARY SCHOOL DRIVER ED PROGRAM	ED 070							
School	No Item No.							
Address	No Item No.							
Phone Number	No Item No.					-		
Town Zip Code	No Item No.							

Control 421

Driver Education If(3) PROGRAM

			Fodons 1 /		Q	Different		
eten	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
DARY	ED 070							-
* Teacher Name Driver Ed No	No Item No.							
Social Security No.	No Item No.							
* Semester Hour Credits incurred and traffic safety	No Item No.							
Administrator of Program	No Item No.							
Title	No Item No.							
Superintendant Signature	No Item No.							
Consultant	No Item No.		_					
Date	No Item No.							
'ASSURANCE OF REQUIRE- MENTS COMPLETION'	ED 070							
<pre>* College or University name and location</pre>	No Item No.							
* Applicant Name	No Item No.							
* Address	No Item No.							
Type of Position	No Item No.							
Recommendation	No Item No.	<u>.</u>						
* Date of requirement completion	No Item No.	•						

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PROGRAM

Driver Education H'(4)

			Federal/		Q	Different		
Data Type	Conn Corn Corn S	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
'ASSURANCE OF REQUIRE- MENTS COMPLETION'(Cont.	ED 070							
Signature of Certifying Officer	No Item No.							
Name and Title	No Item No.							
Date Signed	No Item No.							
APPLICATION FOR CERTIFICATION	TCS Form 26			_				
Name Name	No Item No.							
Social Security No.	No Item No.							
Birth Year	No Item No.							
**Address	No Item No.						_	
*Type of certification requested	No Item No.							
*Type of citizenship	No Item No.							
*Signature	No Item No.							
*Date	No Item No.							
*Institution attended	No Item No.							
*Field of concentration	No Item No.							
Sraduate month, year	No Item No.						_	
*Degree or certification	No Item No.							
*Dates of attendance	No Item No.							

Driver Education H(5) PROGRAM

Data Type For APPLICATION FOR CERTIFICATION			•		۴		_	
			Federal/	_	4	Different		
	Conn	Colo	State		Source	_	Category	
	Form & Item Form &	Item	Variable	Identical	or Level	Collection	Breakout	Remarks
	TCS Form 26							
*Town and State	No Item No.							
*School	No Item No.	•						
*Position , No	No Item No.							
*Dates No	No Item No.	_						
*Employer No	No Item No.							
*Position No	No Item No.							
*Dates No	No Item No.							
QUARTERLY PROGRESS TC:	TCS Form 26							
*Is work on schedule No	No Item No.							
*Describe problems No	No Item No.							
*Compare objective to No accomplishment	No Item No.							
*Is there need for pro-	No Item No.							
*Project director's No signature	No Item No.							
*Date	No Item No.							
*DISTRICT SUMMARY (district no. + county)		CDE Form 2 Section III Part A						
1. Total cost for dis- trict of all programs	,	No Item No.	·					

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Driver Education H(6) PROGRAM

			Fadenal/		A	Different		
	Conn	Colo	State		Source	Time of	Category	
Data Type	Form & Item		Variable	Identical	or Level	Collection	-	Remarks
District No. + County)	i	CDE Form 2 Sec. III Part B	_					
<pre># 2. Total number pupils participating</pre>		No Item No.						
* 3a. Cost per pupil (classroom)		No Item No.						
* 3b. Total cost		No Item No.	-					
* wa. Cost per pupil (on the street)		No Item No.						
* 4b. Total cost		No Item No.						
\$ 5. Number of students enrolled in simula- tor phase		No Item No.						
* 5a. Cost per pupil		No Item No.					_	
* 5b. Total cost		No Item No.						٠
<pre>" 6. Number of students enrolled in multiple ear driving range</pre>		No Item No.						
*6a. Cost per pupil		No Item No.						
*·6b. Total cost		No Item No.				_		
*Indication of new Program to begin next year		No Item No.						
Name and title of person son preparing report		No Item No.						

Driver Education H(7) PROGRAM

						4		
		(Federal/		Course	Time of	Catogomi	
Data Type	Conn Form & Item	Form & Item	a)	Identical	or Level	Collection	Breakout	Rem arks
SCHOOL SUMMARY * (District No. + County)		CDE Form 2 Sec. III Part B						
* School Name		No Item No.						
* 1. Total cost of all programs in school		No Item No.						
<pre>a 2. Total number of pupils participating in all programs</pre>		No Item No.						
* 3a. Cost per pupil (classroom)		No Item No.						
* 3b. Total cost		No Item No.						
<pre>% 4a. Cost per pupil (on the street)</pre>		No Item No.						
* 4b. Total cost		No Item No.						
* 5. Number of students enrolled in simulator		No Item No.						
* 5a. Cost per pupil		No Item No.						
* 5b. Total cost		No Item No.		_		_		
<pre>% 6. Number of students in multiple car driving</pre>		No Item No.						
*6a. Cost per pupil		No Item No.						
* 6b. Total cost		No Item No.						
			;					

Driver Education H(8)

from LEA to from SEA to Remarks Colo: CDE Conn: DOT Conn Colo State Source Time of Category Form & Item Form & Item Variable Identical or Level Collection Breakout Different Conn. Colo. Conn. Conn. Conn. Colo. Conn. Colo. Conn. Conn. Conn. Federal/ No Item No. No Item No. CDE Form 2 Sec. III Part B (7a) HS-1 \mathbb{C} (2) 3 (3) (2) (9) HS-1 (7a) (7)(3) (3) (±) (2) (9) (District No. + County) (Cont.) Indication of new Program to begin next APPLICATION FOR HIGHWAY SAFETY PROJECT GRANT Name and title of person son preparing report 2. Type of application location of project 7a. Budget by category
 of expenditures and address of governmental unit, Application, name 5. Functional area Data Type Description SCHOOL SUMMARY Duration 1. Title Fart I year **÷** 9 ლ

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Driver Education H(9) PROGRAM

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		Remarks	Colo: from LEA to CDE Conn: from SFA to											
		Category Breakout												
	Different	Time of Collection												
	- 1	Source or Level	Conn. Colo.		Conn.	Conn.		Conn.						
		Identical		_								-		
	Federal/	State Variable												
		Conn Colo Form & Item Form & Item	HS-1		(7b)	(7c)		(1)						
		Conn Form & Item	HS-1		(7b)	(7c)		(1)						
		\neg	APPLICATION FOR HIGHWAY SAFETY PROJECT GRANT		*7b. Source of funds	7c. How will no-Federal share be provided	Part II	%l. Significance						

DISCRETIONARY PROGRAMS

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ESEA TITLE III PROGRAM

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PROGRAM ESEA Title III

			1(1)		Ğ	Different		
Ö	Conn Form & Item	Colo Ferm & Item		Identical	Source or evel	Time of Collection	Category Breakout	Remarks
OP	OE 4381 Part I	0E 438i Part I	-					
$\overline{}$	(Sect.Al)	(Sect.Al)		Conn. Colo.				
$\overline{}$	(Sect.A2)	(Sect.A2)		Conn. Colo.				
Ü	(Sect.A3)	(Sect.A3)		Conn. Colo.			·	
3	(Sect.A4)	(Sect.A4)		Conn. Colo.	,			
9	(Sect.A5)	(Sect.A5)		Conn. Colo.	_			
<u> </u>	(Sect.A6)	(Sect.A6)		Conn.Colo.				
Name of applicant (Saddress, county,	ect.A7-10)	(Sect.A7-10)		Conn.Colo.				
<u> </u>	ect.All-12	Sect.All-12 (Sect.All-12)		Conn.Colo.				
4								

PROGRAM ESEA Title III

	Conn	1 7			Source	Different Time of		
	Form & Item Form &	Form & Item	Ϋ́	Identical	or Level	Collection		Remarks
Cont.)	STATISTICAL DATA (Cont.) OE 4381-I	OE 43:1-I						
9. Name of person authorized to receive grant, address, phone, title, signature, date	(Sect.Al3, 14,15)	(Sect.Al3, 14,15)		Conn.Colo				
10. No. of each congressional district served	(Sect.A16)	(Sect. A16)		Conn. Coló.				
Total no. counties served, LEA's served, total esti- mated population in area served	(Sect.A17)	(Sect.A17)		Conn. Collo				
12. Latest average per pupil ADA expendi- ture of LEA's served	(Sect.A18)	(Sect. A18)	.A18) ESS-Di,	Conn. Colo.	_			
Initial, first, second, continuation, total Title III funds, end of period, report by grant no., beginning and end dates, funds re- quested	(Sect.Bl)	(Sect.B1)	CPIR, IIIA 1-8	CPIR, IIIAConn. Colo 1-8			F/SS Conn.Colo.	F/SS total Title III only
Total sq. ft. in facility for Title III use	(Sect.B2b)	(Sect. B2b)		Conn. Colo.				
Remodeling, construction, leasing acquisition, acquisition of equipment	(Sect.B2a)	(Sect. B2a)		Conn. Colo.				
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PROGRAM ESEA Title III

	Remarks						
	Category Breakout Re		Conn.Colo.	F/SS Conn.Colo.	F/SS Conn.Colo.	F/SS Conn.Colo.	
Different	Time of Collection					;	
	Source or Level						
	Identical		Jonn. Colo.	Conn.Colo	Conn.Colo	Conn. Colo	Conn. Colo
Federal/	41		CPIR, IV E1Conn. Colo.	reir jve 2	CPIR, IVES	CPIR, IVE4 Conn. Colo	
	Colo Form & Item	OE 4381-I	(Sect.Cl)	(Sect.C2)	(Sect.C3)	(Sect. D1)	(Sect.D2)
	Conn Form & Item		(Sect.Cl)	(Sect.C2)	(Sect.C3)	(Sect, D1)	(Sect.D2)
	Dəta Type	STATISTICAL DATA (Cont.)	*16. School enrollment in area served, persons served, persons needing service, sub public, non-public by Pre-K, K, 1-6, 7-12, adult, other, totals, staff in inservice training	*17. No. participants by race	*18. Percent served by rural/urban designations	19. Paid by Title III funds; administration/supervisor, teacher (grade category), pupil personnel services, other professional, all non-professional, consultants by regular staff assigned to project, new staff hired for project	20. Personnel not paid by Title III (breakdown as in 19)

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PROGRAM ESEA TITLE III

			Fodons1/		Q	Different		
, LELO	Conn Corn Form &	lo Item	(I)	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
OE 4	OE 4381-I	OE 4381-I						
(Sec	t.E1-4)	(Sect.El-4) (Sect.El-4)CPIR, IVE5Conn.Colo. CPIR, IIIA	CPIR, IVE5C CPIR, IIIA 1-8	Conn.Colo.			F/SS Conn.Colo.	
OE 4381 Part II	181 II	OE 4381 Part II						·
(Sect.I, A-B)	. I,	(Sect.I, A-B)		Conn.Colo.				
(Sect. A-D)	(Sect.II, A-D)	(Sect.II, A-D)		Conn. Colo.				
(Sec	(Sect.III)	(Sect.III)		Conn.Colo				
(Sec	(Sect.IV)	(Sect.IV)		Conn.Colo				
Emphasis (exemplary, (Sec innovative, adaptive	(Sect.V)	(Sect.V)	٠	Conn. Colo				
(Sec	(Sect.VI)	(Sect.VI)		Conn.Colo.				
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PROGRAM ESEA TITLE III

			Federal/	•	4	Different		
Data Type	Conn Corn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
INITIAL APPLICATION NARRATIVE	OE 4381-II	OE 4381-II						
28. Participation of non-public school children	(Sect.VII)	(Sect.VII)		Conn.Colo.	•		-	
*29. Evaluation	(Sect.VIII)	(Sect.VIII	43-	Conn. Colo.				
30. Dissemination	(Sect.IX)	(Sect.IX)		Conn.Colo				*
31. Qualifications of professional personnel	(Sect.X)	(Sect.X)		Conn.Colo.	_			
32. Facilities, equipment, materials	(Sect.XI)	(Sect.XI)		Conn. Colo.	_			
33. Subcontracting	(Sect.XII)	(Sect XII)		Conn.Cole.				
34. Tax effort	(Sect XIII)	(Sect XIII)		Conn.Colo.	<u>.</u>			
PART III ESEA TITLE III PROPOSED BUDGET SUMMARY	OE 4381 Part III	OE 4381 Part III						
35. Name and address of applicant, project number, state	No Item No. No Item No.	No Item No.		Conn. Colo				
*36. Proposed budget sum-No Item No. No Item No. mary or e.timated expenditure report	No Item No.	No Item No.		Conn.Colo.				
*37. Expenditure accts. functional classifi- cation of services by expense classifi- cation	No Item No. No Item No.		CPIR, IVE 50 CPIR, IIIA 1-8	CPIR, IVE5Conn. Colo. CPIR, IIIA 1-8			F/SS Conn.Colo.	

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PROGRAM ESEA Title III

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			Federal/			Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	, Remarks
PART IV ESEA TITLE III	OE 4381 Part IV	OE 4381 Part IV						
38. Assurances for initial application	No Item No. No Item No.	No Item No.		Conn.Colo,				
STATE EDUCATIONAL AGENCY ANNUAL REPORT ON ESEA TITLE III	OE 4462	0E 4462						
PART I STATE MANAGEMENT OF TITLE III	Part I	Part I						
1. State, date, report . prepared by, fiscal year, signature	No Item No. No Item No.	No Item No.		Conn.Colo.				-
*2. Type of staff by no. of positions, no. of persons	(Sect.IA1)	(Sect.IA1)		Conn. Colo.		•		
3. Name staff	(Sect.IA2)	(Sect.IA2)		Conn.Colo.				
*4. SEA and LEA categories of staff by staff development activities	S (Sect.IA3)	(Sect.IA3)	CPIR, IIE 1-4	Conn. Colo.F/SS Conn	F/SS Conn.Cola		F/SS Conn.Colo.	F/SS totals only
5. Numbers of and expenditures for outside consultants to ESEA Title III	(Sect ,Bl-5)	(Sect JBI-5)		Conn.Colo.				
*5. Tabulate use of contractors	(Sect.IC)	(Sect.IC)		Conn.Colo.				
"; No. of State Advisory Council	(Sect.IIA)	(Sect.IIA)		Conn.Colo.				

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PROGRAM ESEA Title III

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Data Type	Conn Corm & Item Form	Colo & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
OF)	OE 4462 Part I	OE 4462 Part I		†	+			
*8. No. of days State Advisory Council met	(Sect.11B)	(Sect.11B)		Conn.Colo,				
Ranking of time spent by State Advisory Council in various activities	(Sect.IIC)	(Sect.IIC)		Conn. Colo				
10. No. of active projects	(Sect_IIIA1) (Sect_IIIA1)	(SectIMA1)		Conn.Colo.				
11. No. of projects · visited	(Sect.IIIA 2-3)	(Sect.IIIA 2-3)		Conn. Colo.	-			
12. No. personnel trained by state	(SectIIIA4) (Sect.IIIA4)	(Sect. IIIA4)		Conn.Colo.			·	
No. of projects: exceeding expecia- tions, mesting expectations, dis- appointing, not determined, total	(Sect.IIIB 1-5)	(Sect.IIIB 1-5)		Conn. Colo.				
14. No. of applications submitted, approved by initial application, continuing application, sub no., dollars	(Sect.IVA) (Sect.IVA)	(Sect.IVA)		Conn. Colo.				
15. No. of projects terminated, continuing without federal funds replicating a Title III project	(Sect.IVB 1-3)	(Sect.IVB		Conn. Colo.				

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PROGRAM ESEA TITLE III

			Federal/		Δ -	Different		
<u> </u>	Conn Form & Item	Colo Form & Item	State Variable	Identical c	Source or Level	Time of Collection	Category Breakout	Remarks
30	OE 4462 Part I	OE 4462 Part I						
List state's criti- cal educational needs and no. of projects and costs for each	(Sect.IVC)	(Sect.IVC)		Conn.Colo.			-	
Areas of national concern by no. of projects estimated no. of pupils served amount granted	(Sect.IVD)	(Sect, IVD)		Conn. Colo.				
No. of public and non-public students and teachers participating by direct and indirect participation	(Sect.IVE)	(Sect IVE)	CPIR, IVE1	Conn. Colo	.F/ss Conn.Cold		F/SS Conn.Colo.	F/SS cannot break down by direct/indirect
No. of types of dissemination activities by target sub paid or not paid by Title III	(Sect.VA)	(Sect.VA)		Conn. Colo.				
Describe most successful dissemina-	(Sect.VB)	(Sect.VB)		Conn.Colo,				
Abstract each project	(Sect.VC)	(Sect.VC)		Conn.Colo,				
Describe administra- tion problems	Describe administra- (Sect.VIA) tion problems	(Sect.VIA)		Conn.Colo,				

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PROGRAM ESEA TITLE III

			1 (3)					
			Federal/		Ω	Different		
Data Type	Conn Corn Form 6	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
STATE MANAGEMENT OF TITLE III (Cont.)	OE 4462 Part I	OE 4462 Part I						
23. What is major contribution of Title III to education in state	(Sect.VIB)	(Sect.VIB)		Conn. Colo.				
24. What changes result from Title III	(Sect.VIC)	(Sect.VIC)		Conn. Colo.				
PART II STATE ADVISORY COUNCIL ACTIVITIES REPORT	OE 4462 Part II	OE 4462 Part II						
*25. Describe Council's activities	3	(1)		Conn.Colo.				
26. What assistance was available from SEA; what is Council's relationship with SEA	(2)	(2)		Conn. Colo.				
*27. Council's involve- ment with state plan, proposals and projects	(3)	(3)		Conn. Colo.				
*28. Council's evaluation of Title III program	3	(4)		Conn. Colo.			_	
"29. Recommendations of Council to Commis- sioner of Education and President's National Advisory	(5)	(5)		Conn.Colo				

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PROGRAM ESEA Title III I (10)

	Remarks								
	Category Breakout Re		_			F/SS Conn.Colo.			
D' FEORDA	Ę g					F/SS Conn			<u> </u>
-	Source or Level		ō		ō	o.F/SS Conn.Colo.		•	ò
	l/ e le Identical		Conn.Colo		Conn.Colo	CPIR, IVES Conn. Colo. F/SS CPIR, IIIA Conn 1-8	Conn.Colo	Conn. Colo	Conn. Colo
	Federal/ O State Item Variable	<u> </u>			~				
-	Item Form & It	OE 4462 Part II	(9)	OE 4462 Part III	(Sect.Al)	(Sect.Bl)	(Sect.C1)	(Sect.D1)	(Sect.El)
	Conn Form & Item	OE 4452 Part II	(9)	OE 4462 Part III	(Sect.Al)	(Sect.B1)	(Sect.C1)	(Sect.D1)	(Sect.El)
	Data Type	STATE ADVISORY COUNCIL ACTIVITIES REPORT (Cont.)	30. SEA Comments	PART III FINANCIAL INFORMATION	*31. Program function category by no. of personnel, object of expenditure, total	32. Functional classifi- cation by expense classification	33. Grant award re- quirements	34. Grant awards, expenditures, and balance of funds	35. Expenditure adjust- ments: item by state administration, general state programs

PROGRAM ESEA Title III

		Remarks	Section I is a rating form and Section II is a narrative in the Colo. on-site evaluation. Conn. Advisory Council Evaluation is also a rating with some narrative	ConnColo, different rating scale through- out			
		Category Breakout		Conn. Colo.	Conn.Colo.		Conn.Colo.
	Different	Time of Collection					Colo. Colo.
	1	Source or Level					
		Identical					
1(11)	Federal/						
		Form	On site evaluation form for Title III ESEA proj- ects - No Form No. (on site evaluation)	(Sect.Ila)	(Sect.Ilb)	(Sect.Ilc)	(Sect.I2a) and proposal evaluation (12) and letter of intent (7)
		Conn Form & Item		Advisory Council Evaluation Questionnaire No Form No. (ACEQ)	ACEQ (Sect.Fl a-d)		ACEQ (Sect. B3, 4)
		Data Type	ON SITE EVALUATION FORM FOR TITLE III ESEA PROJECTS - COLORADO	*1. Current direction consistent with stated objectives	<pre>"2. All involved with project are aware of objectives</pre>	"3. LEA policies con cucive to accom- plishing objectives of project	"4. Project activities appropriate to meet objectives

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PROGRAM ESEA TITLE III

		t						
	Remarks					F/SS - rating of quality and availability of resources listed		•
	Category Breakout		-	Colo. Colo.		F/SS, Colo. Colo.	Conn. Colo.	Colo.
Different	Time of Collection			Colo. Colo.		Colo. Colo. F/SS	Coio. Colo. F/SS	Colo. Colo.
	Source or Level							
	Identical							
Federal/	State Variable					PCI-Pr,Q38	PCI-P5,Q37	·
	Colo Form & Item	On site evaluation form	(Sect.12b)	(Sect.I2c) u) and proposal evaluation (16)	(Sect.12d)	(Sect.I3a) and proposal evaluation (19)	(Sect.I3b) and proposal evaluation (17)	(Sect.13c) and proposal evaluation (18)
	Conn Form & Item			ACEQ (Sect.F2, 3,			ACEQ (Sect.Cl) (Sect.H2)	ACEQ (Sec., C2)
	Data Type	ON SITE EVALUATION FORM - COLORADO (Cont.)	#5. Reasonable progress to objectives being made	%6. Dissemination appropriate and adequate, and type	*7. Safeguards of nega- tive effects on children	*8. Physical resources appropriate and adequate to achieve objectives	*9, No. of staff adequate to achieve objectives	10. Personnel have qualities essential to success

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PROGRAM ESEA TITLE III

	Remarks			Conn financial management only		End of project report is narrative, others different rating scales. Both Colo. forms are different by time of collection from each other, so are both Conn. forms. But ACEQ and Colo.on site evaluation are alike in time of collection.
	Category Breakout		Colo. Colo.	Conn. Colo.		Conn. Colo.
Different	Time of Collection		Colo. Colo.		Colo.Colo.	Colo. Colo.
	Source or Level					
	Identîcal					
Fodons 1 /	reuerai/ State Variable					
	Colo Form & Item	On site evaluation form	(Sect.I4a) and proposal evaluation (22) and letter of intent (6)	- (Se	(Sect.I5a) and proposal evaluation (Sect.A9)	(Sect.15b) and proposal evaluation (24)
	Conn Form & Item		ACEQ (Sect.G1) (Sect.I8)	ACEQ (Sect.G2,3)	(Sect.15a)	ACEQ (Sect.64,5) and end of project report (Sect.Bla)
	Data Type	ON SITE EVALUATION FORM - COLORADO (Cont.)	*11. Budget appropriate for operation	*12. Good administrative practice exists in leadership, supervision, fiscal management	*13. Provisions to inte- grate project to regular school program	*14. Continuation of project at end of federal funding

PROGRAM ESEA TITLE III I(14)

			Federal/			Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	. Time of Collection	Category Breakout	Remarks
ON SITE EVALUATION FORM - COLORADO (Cont.)		On site evaluation form						
%J5. Evaluation appropriate	ACEQ (Sect.El, 2,3) (Sect.I6)	(Sect.I6a) and proposal evaluation (14)				Colo. Colo.	Conn.Colo.	
*16. Provisions for follow-up appopriate	- au	(Sect. 17a)						
*17. Project strengths	ACEQ (Sect.H1)	(Sect.III)		Conn. Colo.				
*18. Project weaknesses	ACEQ (Sect.H2)	(Sect. II2)		Conn.Colo.	-		•	
*19. Suggestions for improvement		(Sect.II3) and proposal evaluation				Colo. Colo	Colo. Colo.	
		(Sect.B1)			_ -	Colo. Colo.	Colo.Colo.	
*20. Additional comments		(Sect.II4) and proposal evaluation (Sect. §2)						
#21 LEA name, project title, evaluator, visit date, deadline, addressee		No Item No.						
								

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PROGRAM ESEA Title III I(15)

Duta Type Coun Column			1	(61)1					
Form 6 Item Collada State Source Time of Category Remark of Form 6 Item Variable Identical Or Level Collection Breakout Froposal Fr				Federal/		Ω	fferent		
Proposal form is Evaluation Proposal form is Evaluation Sect.A1) Sect.A2 Sect.A2 Sect.A2 Sect.A2 Sect.A3 Sect.A3 Sect.A3 Sect.A3 Sect.A3 Sect.A3 Sect.A4 Sect.A5 Sect	Data Type	Conn Form & Item	Co Form &		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
Contrib Sect.A1) Sect.A2 Sect.A2 Colo.Colo. Colo.Colo rating scale letter Colo.Colo. Colo.Colo. Colo.Colo rating scale letter Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo.Colo. Colo.Colo.Colo. Colo.Colo.Colo.Colo.Colo.Colo.Colo.Colo	RADO TITLE III ESEA OSAL EVALUATION FORM		ritlesta Proposal Evaluation						1
Will meet critical educational need successional need and letter (Sect.A2) Colo.Colo <			(Sect.A1)						
Re_ated to benefics (Sect.A3)* Colo.Colo. Colo.Colo. for children and letter Letter Colo.Colo. Colo.Colo. innovative or exemplary ACEQ (Sect.H3) 4a,b) Nolo.Colo. Conn.Colo. exemplary ACEQ (Sect.A3) Aa,b) Colo. Colo. Non-profit, private ACEQ (Sect.A5) Conn.Colo. Conn.Colo. school participation (Sect.A5) (Sect.A6) Conn.Colo. school participation (Sect.A1) (Sect.A4) Conn.Colo. stidence of iroad (Sect.A1) (Sect.A8) Conn.Colo. findings (Sect.A1) (Sect.A8) Conn.Colo.			(Sect.A2) and letter of intent (2)				Colo. Colo	3010.Colo.	ale ale
Innovative or ACEQ (Sect.A) 4a,b) exemplary (Sect.H3) 4a,b) and letter of intent (I) Non-profit, private ACEQ (Sect.A5) school participation (Sect.D2) Evidence of road ACEQ (Sect.A5) Evidence of road ACEQ (Sect.A5) Evidence of road (Sect.D1) Evidence of road (Sect.D1) Sect.D1) Awareness of research (Sect.A8) findings Objectives appropriate (Sect.A10)	Re_ated to benefits for children		(Sect.A3) and letter of intint (9)					Colo.Colo.	
Non-profit, private ACEQ (Sect.A5) school participation (Sect.D2) Adequate plar ing Evidence of iroad ACEQ (Sect.A7) involvement (Sect.D1) (Sect.D1) (Sect.L14,5) findings Objectives appropriate (Sect.A10)	Innovative exemplary	ACEQ (Sect.H3)	(Sect.A 4a,b) and letter of intent (1)			·	.co1.o.Co1o.		
Adequate plarting (Sect.A6) Evidence of proad (Sect.D1) (Sect.D1) (Sect.I4,5) Awareness of research (Sect.A8) findings (Sect.A8) Objectives appropriate (Sect.A10)		ACEQ (Sect.D2)	(Sect.A5)				,	Conn.Colo.	
ACEQ (Sect.A7) (Sect.14,5) (Sect.A8) (Sect.A10)			(Sect.A6)						
at at		ACEQ (Sect. D1) (Sect. I4, 5)						Conn.Colo.	
a			(Sect.A8)						
	Objectives appropriat	-	(Sect.A10)						

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PROGRAM ESEA Title III

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Data Type	Conn Form & Item	Colo Form & Item	rederal/ State Variable	Identical	Source or Level	Time of	Category	Romarke
PROPOSAL EVALUATION FORM (Cont.)		Proposal Evaluation Form No Form No.			 -			
*10. Objectives clearl; stated		(Sect.All) and letter of intent (3)				Colo.Colo.	Colo.Colo.	
*11. Proposal presents activities in sequence with begin- ning and ending dates		(Sect.Al3)						
*12. Evaluation is based on objectives		(Sect.A15)			_			
*13. Best talent and resources will be utilized		(Sect.A20)	-					
*14. Coordinated use of other funds		(Sect.A21)						
*15. LEA capable of executing project		(Sect.A23) and letter of intent (8)				Colo. Colo.	Colo. Colo.	
*16. Overall proposal rating		(Sect.R1)						·
*17. What changes or additions		(Sect.Bl)	· · ·	* * **				
			-				_	

PROGRAM ESEA Title III

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	Conn	Colo				Time of	Category	
Data Type	Form & Item Form	Form & Item	Variable	Identical	7	Collection	Breakout	Remarks
TITLE III ESEA LETTER OF INTENT RESPONSE SHEET		No Form No.				_		
 Measurability of cbjectives 		(4)						
2. Consistency of project costs with objectives		(5)						
3. Applicant should proceed as described		No Item No.						
4. Applicant should proceed after changes		No Item No.						
5. Applicant should not proceed		No Item No.						
6. Reasons		No Item No.						
TITLE III ADVISORY COUNCIL EVALUATION QUES- TIONNAIRE								
1. Listing of objectives as understood by respondent with accompanying activities	ACEQ (Sect.A) No Item No. and Annual Eval. Report I			Conv. Conn.		-		ACEQ Sect.A rating boxes for self-evaluation and on-site evaluation
 Comments regarding objectives 	ACEQ (Sect.A) No Item No.							
3. Internal communica- tions clear	ACEQ (Sect.B2)	_						

PROGRAM ESEA TITLE III

	<u> </u>							
			Federal/	•	- 1	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
TITLE III ADVISORY COUNCIL EVALUATION QUESTIONNAIRE (Cont.)								
4. Project responsive- ness to clients	ACEQ (Sect.B5)							
 Staff in direct contact with clientele 	(Sect.B6)							
6. Good working rela- tionship between board and staff	(Sect.B7)			4000				
7. Project personnel understand roles	(Sect.C3)							
8. Staff assignments appropriate objectives	(Sect.C4)							
9. Comments	(Sects.B, C,D,E,F,G, I)						•	
10. Funds for evaluation adequate	(Sect.E4)			•				ACEQ Sect.E4: Yes, No, NR; if No, explain;
 Influence of this project on oncoing educational prac- tices 	(Sect.H4)				·			
12. Spectal or unusual problems	(Sect.H5)			_				
13. Persistent or recurring problems	(Sect.H6)						u- commo o m -100 - 4.	

ESEA TITLE III I(19) PROGRAM

TITLE III ADVISORY COUNCIL EVALUATION QUESTIONNAIRE (Cont.) 14. Suggestions to strengthen Title III 15. Objectives being 16. Staff is performing effectively TITLE III ADVISORY COUNCIL EVALUATION ACEQ Strengthen Title III 15. Objectives being (Sect.II) effectively TITLE III ADVISORY ACEQ COUNCIL TEAM NARRATIVE REPORT 1. Project title No Item No. 2. Narrative No Item No. 1. Project title and director 1. Project title and director 2. Date of on-site (Ia)	I tem	State Variable I	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ing ZAM							
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을 보고							ect.I
<u> </u>	_						boxes self-eval- uation and on-site evaluation
			-				
	_	-		. ,			Team narrative report based on on-site
							evaluation
p	_		•				
		·					
				·			
Name evaluation team (Ib)							
Overall appraisal: (I:)							
ditional approval; conditional disap- proval; recommenda- tions, narrative	*						

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PROGRAM ESEA TITLE III

Date Type Conn Federal Conn Colo Category Conn Colo Category Category Conn Category Category									
Ditable Form 6 Item Collection Source Iline of Category				Federal/			ifferent		•
TE TILLE III PROGRAM Project Ac- Date of feedback (IIa) by by tion Record Consultation dates and concultation dates and concultation date and discussion date account of cecommendations Date Council review Continuation proposal Lirt departmental Council recommenda- tion: approve, disapprove disapprove disapprove disapprove disapprove disapprove disapprove	D∴ta Type	Conn Form & Item	~ 1		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
Date of feedback (IIa) by consultation dates and consultant Discussion date and discussant of pre- liminary continuation proposal Preliminary proposal; (IId) degree to which it takes account of trecommendations Date Council review (IIIa) Date Council recommendation Date succepted Council recommendation Lirt departmental (IIIb) Lirt departmental (IIIc) Lirt departmental (IIIc) Date revision Date revision Council recommenda- tion: approve, disapprove Are solution Date revision Commissioners' action; (IVb) approve, disapprove Commissioners' action; (IVb)	STATE TITLE III PROGRAM PROJECT ACTION RECORD	Project Action Record							
Consultation dates and concultant Discussion date and discussant of pre- liminary continuation proposal Preliminary proposal; (IId) degree to which it takes account of recommendations Date Council review (IIIa) Continuation pro- posal List departmental (IIIb) List departmental (IIIc) Council recommenda- tion: approve, disaption: (IVa) Date revision Commissioners' action: (IVb) approve, disapprove Commissioners' action: (IVb)	5. Date of feedback with director by	(IIa)							
Discussion date and discussant of pre- liminary continuation proposal proposal; (IId) Preliminary proposal; (IId) degree to which it takes account of recommendations Date Council review (IIIa) continuation pro- posal List departmental (IIIb) reviews Council recommenda- tion: approve, disapprove, disapprove, hold, points for resolution Date revision Commissioners' action: (IVb) approve, disapprove Commissioners' action: (IVb)	6. Consultation dates and consultant	(IIb)							
Preliminary proposal; (IId) degree to which it takes account of I ecommendations Date Gouncil review (IIIa) continuation proposal Lirt departmental (IIIb) reviews Gouncil recommenda- (IIIc) tion: approve, disapprove, hold, points for resolution Date revision accepted Gommissioners' action: (IVb) approve, disapprove	7. Discussion date and discussant of pre-liminary continuation proposal								
Date Council review continuation proposal List departmental reviews Council recommendation: approve, disapprove, hold, points for resolution Date revision accepted Commissioners' action: approve, disapprove	8. Preliminary proposal; degree to which it takes account of recommendations								
List departmental reviews Council recommerdation: approve, disapprove, hold, points for resolution Date revision accepted Commissioners' action: approve, disapprove	9. Date Council review continuation proposal	(IIIa)							
Council recommendation: approve, disapprove, hold, points for resolution Date revision accepted Commissioners' action: approve, disapprove	19. Lirt departmental reviews	(IIIb)	•						
	11. Council recommerda- tion: approve, disap- prove, hold, points for resolution							-	
	12. Date revision accepted	(IVa)				_			
	13. Commissioners' action approve, disapprove					-			
					•				

PROGRAM ESEA Title III I(21)

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Data Type	Conn Corn Form & Item Form &	Lo Item	State Variable	ident cal	Source or Level	Time of Collection	Category Breakout	Remarks
ANNUAL EVALUATION REPORT								
*1. Name, period, sub- mitted by	No Item No.							
*2. Evaluation techniques	(I)				***********			
"3. Description of evaluation population: population no., characteristics, other related information	(IIA-B)					,		
*4. When and how evalua- tion carried out	(111)							
*5. Evaluation results for each objective	(IV)	-	-			-		
*6. Overall appraisal of effectiveness	(V) ACEQ (Sect.I1-9)						Conn. Conn.	•
END OF PROJECT EVA!UATION REPORT		_						
Name, period, sub- mitted by	No Item No.		-					
"2. Final evaluation showing effectiveness in improving educa- tional opportunities of persons in a ea served	(Sect.A)							

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PROGRAM ESEA Title III 1(22)

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			Federal/		- 1	Different			
	Conn Corn Co Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks	
EPORT EVALUATION End of Proj. REPORT	End of Proj.								
"3. Reasons project is or is not being continued	(Sect.Blb)								
%4. List district adopting all or part of project	(Sect.Blc)								
FINANCIAL ALLOCATION AFFIDAVIT	ECAS-1				<u>, </u>	_			
*1. Dave and signature of superintendent of schools.	No Item No.								
"2. Date and signature of town fiscal offi- cer, title, town	No Item No.								
ESTIMATE OF MONTHAY CASH NO FORM NO. YEAR	No Form No.								
1. Cash by month and total	No Item No.					-			
STATUS OF CASH FOR QUARTER ENDING 1. Due date, person completing foru, School district	Probably ESEA-4 No Item No.								
						~		į	

PROGRAM ESEA Title III I (23)

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Data Type	Conn Colo	Colo Form & Item	- 0	identical	Source or Level	Source Time of or Level Collection	Category Breakout	Remarks
STATUS OF CASH FOR QUARTER ENDING (Cont,)	ESEA-4	-						
2. Title I target groups, Title II, Title III, ABE by categories of information on finances	No Item No.		CPIR, IIIA			F/SS, Conn.	F/SS, Conn.	F/SS - total expendi- ture only
3. Title I target groups, Title II, Title III,ABE by cash balance	No Item No.							
PROPOSED BUDGET SUMMARY - Part II of OE 4381	ECAS-2							
FINAL EXPENDITURE REPORT OF STATE-GRANTED FUNDS	ECAS-3							
 Expenditure accts.: functional classifi- cation by expense classification 	No Item No.		CPIR, IVES			-	F/SS, Conn.	Total expenditures only
2. Name and address of local agency, project name, project no., state grant period begin and end	No Item No.							
3. Signature of person to receive grant and date	No Item No.							

PROGRAW ESEA Title III

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		Remarks							<u>د</u> -					
		Category Breakout										 		
	Different	Time of Collection									5555	 		
		Source or Level										 	•	
I (24)		Identical			Conn. Colo.	_				•				
I	Federal/	State Variable						•					-	
		Colo Form & Item			OE 4381									
	٠	Conn Conn Form 8	ECAS-3a	No Item No.	OE 4381									
		Data Type	AFFIDAVIT OF SUPERIN- TENDENT OF SCHOOLS	1. Name and superinten- No Item No. dent signature	FOR CONTINUING PROJECT ADD PROPOSAL NARRATIVE TO OE 4381, PART I AND III									

SPECIAL EDUCATION PROGRAM

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PROGRAM Special Education

			Federal/			Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Catagory Breakout	Remarks
A. APPLICATION, AMENDMENT AND REPORT PART I - STATE PROJECT APPROVAL, STATIS- TICAL DATA, AND ABSTRACT BY STATE OR LOCAL AGENCY	OE 9025	OE 9025		Conn Colo				
L. Identification data, amount approved	(1è6)	(1-6)		Conn. Colo				
2. Average per handi- capped pupil expendi- ture from non-federal funds by fis al year	(7-9)	.(7-9)		conn colo				
3. Identification of agency applying	(10)	(10)		Conn Colo				
4. Type of form	(11)	(11)		Conn Colo				
5. Identification of project location	(12)	(12)		Ccnn Colo				
6. Funding source	(13)	(13)		Conn Colo				
7. Identification of Project Director	(14)	(14)		Conn Colo				
8. Duration of project	(15)	(15)		Conn Colo				
9. Title of project	(16)	(16)		Conn Colo				
*10. Schools and school districts with pro- ject participants	(17)	(17)		Conn Colo		-		
#11. Descriptors (select for ASIS Retrieval terms)	(18)	(18)		Conn Colo	_			
*12. Project abstract	(19)	(19)		Conn Colo				

Special Education J(2) PROGRAM

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Data Tvo.	Conn Com Form & Item Form &	Colo Form & Item	State	Tdentical	Source	Time of	Category	
. PART I - STATE PRO- TECT APPROVAL, STATIS- TICAL DATA, AND ABSTRACT (Cont.)	OE 9025	0E 9025		7~				NATIONAL PROPERTY OF THE PROPE
*13. Whether project is Cooperative (yes,no)	(20)	(20)	ESS-Di, Q12	F/SS Conn Colo				
Federal funds used in cooperation with this project			ESS-Pr, Q15		F/SS		F/SS Conn Colo	
Number of children served by age, by type of handicap	(21A)	(21A)		Conn Colo				
Number of culidren receiving services by category	(21B)	(218)		Conn Coo				
*17. Number of children receiving services by demographic area	(21C)	(21C)		Conn Colo				
Number of project personnel paid by Federal project funds by the type of personnel, by the type of handicap, by total man-weeks	(21D)	(21D)		Conn Colo				
Number of personnel receiving in-service training from Federal project funds by type of personnel by the type of handicap by total, by total clock hours provided	(21E)	(21E)	CPIR IIE 1-4	Conn Colo	•		F/SS Conn Colo	

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Part I

Special Education J (3) PROGRAM

Data Type Form & Item PART I - STATE PRO- CT APPROVAL, STATIS- CAL DATA, AND ABSTRACT Ont.) Number of parents receiving services through project funds Number of non-paid volunteers participating in this project i.g in this project Amounts (requested, approved, expended) by fiscal years Expenditures by Services provided, by type of expense,	ည	Federal/ State		g	Different		
Data Type PART I - STATE PRO- CT APPROVAL, STATIS- CAL DATA, AND ABSTRACT ont.) Number of parents receiving servicathrough project funds Number of non-paid volunteers participating in this project Amounts (requested, approved, expended) by fiscal years Expenditures by Services provided, by type of expense,	Co. Form &	State					1
PART I - STATE PRO- CT APPROVAL, STATIS- CAL DATA, AND ABSTRACT ont.) Number of parents receiving services through project funds Number of non-paid volunteers participating in this project Amounts (requested, approved, expended) by fiscal years Expenditures by services provided, by type of expense,		Variable	Identical	Source or Level	Time of Collection	Category	Kenanka
	OE 9025		Conn Cold				
Number of non-paid volunteers participating in this project Amounts (requested, approved, expended) by fiscal years Expenditures by services provided, by type of expense,	(22)		Conn Colc				
Amounts (requested, approved, expended) by fiscal years Expenditures by services provided, by type of expense,	(23)		Conn Cold				
Expenditures by services provided, by type of expense,	(54)		Conn Cold		•		
by total amount by grand total	(25)	CPIR IIIA 1-8	Conn Cola			F/SS Conn Colo	
24. Project expenditures (26)	(26)		Conn Colc				
25. Project expenditures by special categories	(27)	•	Conn Cold				
B. PART II - PROJECT IN- FORMATION, STATEMENT OF ASSURANCES, COOPERATIVE AGENCY AGREEMENT	OE 9025-1		Conn Cold				Sections A-C are in narrative format on OE 9025-1
1. Gaps or weaknesses (Al)	(A1)		Conn Colq				
2. Elimination of gaps (A2) or weaknesses	(A2)		Conn Colc				
3. Coordination (A3)	(A3)		Conn Colo		•		



PROGRAM

Special Education J(4)

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Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
B. PART II - PROJECT IN- FORMATION, STATEMENT OF ASSURANCES, COOPERATIVE AGENCY AGREEMENT(Cont.)	OE 9025-1	OE 9025-1		Conn Colo				
4. Dissemination	(A4)	(A4)	,	Conn Colo				
<pre>%5. Statement of each major project objective</pre>	(B1)	(B1)		Conn Colo			,	
6. Designation of pupils to whom the objective is applicable	(B2)	(B2)		Conn Colo			,	
kga. Criteria to be used in selecting chil- dren to participate	=	= ,		=				
6b. Number of children	=	=		=				
*7. Description of activities to accom- plish this objective	(B3)	(B3)		Conn Colo				
*8. Criteria for evaluation	(B4)	(B4)		Conn Colo			_	
9. Justification	(BS)	(BS)		Conn Colo				
10. Statement of Assurances and Certification	(c)	(3)		Conn Colo			··•	
11. Identification data for agency designated administrative and fiscal agent for this project (cooperative agency agreement)	(1 A-D)	(1 A-D)	·	Conn Colo				

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Special Education PROGRAM

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		Remarks										
		Category Breakout		·	_							
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	Federal/	State Variable										
		Conn Colo Form & Item	OE 9025-1	(1 i)	(1 J)	(1 K)	(1 L)	(2 1,2,3)	OE 9016	Part I	А	(B 1-6)
•		Conn Form & Item	OE 9025-1	(1 i) g	(1 J)	(1 K)	(1 L)	(2 1,2,3)	OE 9016	Part I	A	(B 1-6)
		Data Type	B. PART II - PROJECT IN- FORMATION, STATEMENT OF ASSURANCES, COOPERATIVE AGENCY AGREEMENT(Cont.)	*12. Number of handicapped children participating in this project	13. Source of funds	"l4. Amount of funds authorized	*15. Amount of funds expended	16. Certification of Cooperating Agencies (I.D. data, no. of handicapped, source of funds, amount of funds authorized and expended)	DESCRIPTION OF PROJECTED ACTIVITIES FOR FISCAL YEAR 1971 FOR THE EDUCATION OF HANDICAPPED CHILDREN BY STATE LEVEL	A. PART I - SUMMARY COVER SHEET	1. Identification data	for fiscal year 1971 from specific Federal monies and total

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Special Education J(6) PROGRAM

Conn A. PART I - SUMMARY COVER SHEET (Cont.) 3. Fiscal year 1971 Title VI-A funds not to be expended and amount 4. Name, title and signature for certification by authorized program officials B. PART II - DESCRIPTION Part II OF STATE SPECIAL EDUCA-TION PROGRAM TION PROGRAM * 1. Type of handicap by estimated number of children to be served and not served and not served and not served and not served stimated additional staff needed, estimated non-federal funds to be expended, estimated be expended, estimated	io i	Federal/ State Variable	Identical Conn Colo	Source	Different Time of	Category	
Data Type PART I - SUMMARY FISCAL YEAR funds not to be expended and amount Name, title and signature for certification by authorize program officials PART II - DESCRIPTION STATE SPECIAL EDUCA-ON PROGRAM Type of handicap by estimated number of children to be served and not served, by estimated additional staff to be employed estimated additional staff needed, estimated non-federal funds to be expended, estimated by the expended, estimated additional staff needed, estimated be expended, estimated by the stimated be expended, estimated be expended, estimated by the stimated by the s	·	State /ariable		urce	Time of		
Fiscal year 1971 Fiscal year 1971 Title VI-A funds not to be expended and amount Name, title and signature for certification by authorize program officials PART II - DESCRIPTION STATE SPECIAL EDUCA-ON PROGRAM Type of handicap by estimated number of children to be served and not served, by estimate number of staff to be employed estimated additional staff needed, estimated non-federal funds to be expended, estimated by estimated additional staff needed, estimated additional staff needed, estimated be expended, estimated be expended.		מון דים	$\neg \land \neg$		001100+100		Domenica
Fiscal year 1971 Title VI-A funds not to be expended and amount Name, title and signature for certification by authorized program officials PART II - DESCRIPTION Part STATE SPECIAL EDUCA- NO PROGRAM Type of handicap by estimated number of children to be served and not served, by estimate additional staff to be employed, estimated additional staff needed, estimated non-federal funds to be expended, estimated				7			Names A
Name, title and signature for certification by authorized program officials PART II - DESCRIPTION Part STATE SPECIAL EDUCA- NO PROGRAM Type of handicap by estimated number of children to be served and not served, by estimate number of staff to be employed, estimated additional staff needed, estimated non-federal funds to be expended, estimated			Conn Colo				
STATE SPECIAL EDUCA- DN PROGRAM Type of handicap by estimated number of children to be served and not served, by estimate number of staff to be employed, estimated additional staff needed, estimated non-federal funds to be expended, estimated			Conn Colo				
Type of handicap by estimated number of children to be served and not served, by estimate number of staff to be employed, estimated additional staff needed, estimated non-federal funds to be expended, estimated							
additional funds required and total	(1-13)		Conn Colo				•
2. Number of leadership 14 personnel (employed, needed)	14		Conn Colo	-			
3. Number of para- professional personnel (employed, needed)	15		Conn Colo		,		·
<pre>% 4. Non-federal funds 16 (state, local, non-public)</pre>	16		Conn Colo				

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Special Education J(7) PROGRAM

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Data Type	Conn Form & Item	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Rem arks
B. PART II - DESCRIPTION OF STATE SPECIAL EDUCA- TION PROGRAM (Cont.)	Part II OE 9016	Part II OE 9016	-					
*5. Estimated number of handicapped children to be served	(17)	(17)		Conn Colo				
%6. Estimated number not to be served	(18)	(18)		Conn Colo				
7. Estimated number of staff to be employed	(19)	(19)		Conn Colo				
8. Estimated additional staff needed	(20)	(20)		Conn Colo				
*9. Estimated funds to be expended i.on all sources	(21)	(21)		Conn Colo				
<pre>10. Estimated additional funds required from all sources</pre>	(22)	(22)		Conn Colo				
All. Rationale for estimates of number of handicapped children in each category to be served and not to be served	Part II p. 2	Part II p. 2		Conn Colo				
C. PART III - PROGRAM PLANS	Part III	Part III					***	
*1. Major problem (numbered)(narrative)	la)	la		Conn Cold			-	
<pre>% 2. Long range objectives (numbered)(narrative)</pre>	s lb	ብ		Conn Colo				

PROGRAM

Special Education J(8)

	Remarks									
	Category Breakout		_				F/SS Conn Colo			
Different	Time of Collection							_		
ı	Source or Level									
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Federal/	State Variable						CPIR IB			
	lo Item	Part III OE 9016	(2 a-b)	(B) p. 4	(0)	(El 1-2)	(E1 3) C	(E2)	(F1)	
	Conn Corm & Co	Part III OE 9016	(2 a-b)	(B) p. 4	(0)	(E1 1-2)	(E1 3)	(E2)	(F1)	
	Type	C. PART III - PROGRAM PLANS	* 3. Activities by source of funds and cost	<pre>4. Problem (numbered) by source of funds (federal and non- federal) and total</pre>	5. Total anticipated expenditures '74-'75	* 6. Children to be served (El 1-2) by funding source by handicap conditions and total	* 7. Number of Title VI-A children expected to be from non-public schools	* 8. Number of personnel cxpected to receive training by category of handicap	* 9. Continuing projects (project number) by descriptive title of project, applicant agency, type and no. of handicapped children, by cost, by Federal funding	source

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PROGRAM

Special Education

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Type	Form & Item Form &		Variable.	Identical	or Level	Collection	Breakout	Remarks
D. PART IV - STATE ADMINISTRATION	Part IV OE 9016	Part IV OE 9016		Conn Colo				
* 1. Estimated expenditures by funding source by category	(A 1-9)	(A 1-9)		Conn Colo		•		
2. Name and title, percent of salary paid by Title VI-A or PL 89-313, brief description of duties and responsibilities of each SEA staff member	(B)	(B)		Conn Colo				Sections B-G of this form are in narrative format
* 3. Brief description of planning activities	(2)	(0)		Conn Colo				
* 4. Brief description of administrative pro-	(a)	(a)		Conn Colo				
* 5. Brief description of evaluation activities	(E)	(E)		Conn Colo				
6. Brief description of dissemination	(F)	(F)		Conn Colo				
7. Copies of applica- tion forms and other supplementary infor- mation used in administration of program	(9)	. (9)		Conn Colo				
SPECIAL STUDY INSTITUTE EVALUATION FORM	OE 9021	OE 9021						
*1. Name of agency	(1)	(1)		Conn Colo				

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PROGRAM

Special Education J(10)

Remarks Form & Item Variable Identical or Level Collection Breakout Time of Different Source Conn Colo Federal/ State 000 OE 9021 (3)3 $\widehat{\Xi}$ (2) 9 (2) (8) 6) Form & Item Conn OE 9021 . (8) (3)(3) $\widehat{\Xi}$ (2) (9) (2) 6) and recreation, others Number of each of the following type of participants: general Whether certification Areas to which SSI pertained: VH, deaf crippled, emotionally supervisors, psychold *2. Title of special study institute (SSI disturbed, MR, admin speech and hearing, specific learning of related, physical ed gists, nurses, social ed teachers, special ed teachers, general SPECIAL STUDY INSTITUTE disability, multi-handicapped, interadmin./supervisors, special ed admin./ Name and title of or college credit given for the SSI directors of SSI *5. Location of SSI workers, aides EVALUATION FORM *4. Date of SSI Abstract . 9 ÷6 *7 *8 *8 ģ

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Special Education J(11) PROGRAM

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	Conn	Colo	State		Source	Time of	Category	
	Form & Item Form &	Item	Variable	Identical	or Level	Collection	Breakout	Remarks
SPECIAL STUDY INSTITUTE EVALUATION FORM (Cont.)	OF 9021	OE 9021						
*10. List of most valuable aspects of SSI	(10)	(10)		Conn Colo				
#ll. List of ways SSI could have been improved	(11)	(11)		Conn Colo				
*12. Description of methods (12) used in evaluating this SSI and summarize the results of the evaluation	ls (12)	(12)		Conn Colo				
*13. Description of ways in which SSI was innovative	(13)	(13)		Conn Colo				
*14. Copies of literature	(14)	(14)		Conn Colo				
*15. Name of prepares, title, signature, date	No Item No. No Item No.	No Item No.		Conn Colo				
FINAL FINANCIAL STATEMENT	OE 3003	OE 9003			,			
* 1. Name and address of grantee, grant no., period of grant	No Item No.	No Item No. No Item No.		Conn Colo				
* 2. Summary of awards (traineeships and fellowships, subtotal SSI, subtotal, program development grant, subtotal, admin. costs, totals) by	Section A - Analysis 1 of Grants	Section A - Analysis of Grants						

PROGRAM Special Education J(12)

	Different	Time of Category Collection Breakout Remarks									
\\	Di	Source Source Identical or Level C			Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colo	Conn Colc	-
	Federal/	State Variable		-	ပိ		· ·	Ö	Ö	<u> </u>	
		Item Form & Item	OE 9003		Section A p. 2	Section A p. 2	Section A p. 2	Section A p. 2	Section A p. 2	Section A p. 2	
		Conn Form & Item	E 9003		Section A p. 2	Section A p. 2	Section A p. 2	Section A p. 2	Section A P. 2	Section A p. 2	
		41	FINAL FINANCIAL STATEMENT (Cont.)	* 2(Cont.) (area of handicap, level of training, no. of students, no of eligible dependents, student stipends, support grants, total funds paid)	* 3. Amount of grant	* 4. Total funds received Section A	*5. Total funds expended Section A	6. Total funds not expended	7. Comments	(name, ure and rized finan-	cial officers

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Special Education J(13) PROGRAM __

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-	400	0	Federal/ State	•	Source	Time of	Category	
₩	Form & Item Form	& Item	e	Identical	1	Collection	Breakout	Rem arks
INAL FINANCIAL STATEMENT (Cont.)	OE 9003	OE 9003						
Area symbol, name of award recipient, institution attended, level of training, summer traineeships only length of training [days,weeks], no. of eligible dependents, total stipend paid to student, total support grant claimed per student, date of dropout	Section B	Section B		Conn Colo				
and 9.	Section C- Report of SSI Awards	Section C- Report of SSI Awards		Conn Colo				
Home and location of institute, length of program, area of handicap, beginning and ending dates of institute	of No Item No. of	No Item No.		Conn Colo				
Compensation for personal services (name and title, institute responsibility, amount)	(A)	(A)		Conn Colo				
Total stipends paid	(B)	(B)		Conn Cold				
No. of:enrollees completing institute dropouts	(B)	(B)		Conn Colo				

PROGRAM Special Education J(14)

Data Type Conn Federal Source Time of State									
Data Type Come & Item Colo Colection State Colection				Federal/		1)iffe re nt		
Data Type From 6 Item From 6 Item Variable Identical Or level Collection Breakout		Conn	Colo	State			Time of	Category	
### FINANCIAL OE 9003 OE 9003 ##################################	Data Type	Form & Item	Form & Item	Variable		or Level	Collection		Remarks
Employee services and benefits-amount of fice supplies (D) (D) (D) (Compupplies (D) (F) (F) (Compupplies (F) (F) (F) (Compupplies (F) (F) (F) (Computition (G)	FINAL FINANCIAL STATEMENT (Cont.)	OE 9003	OE 9003						
Instructional Supplies Travel Travel		(2)	(2)		Cerin Colo				
Instructional (E) (E) (Computes (F) (F) (F) (Computition (G)		(D)	(a)		Conn Colo				
Fees other than (G) (G) (G) Conntuition Rental of equipment (H) (H) (H) Conn Total direct costs No Item No. No Item No. Gonn Grand Total No Item No. No Item No. Conn Same as 1., 9., and Report of Report of Program Program Development Grants Grants Grants Area of handicap No Item No. No Item No. Conn Grant Service (name and title, respon-and title, respon-sibility for PDG, amount expended Employed services (B) (B) (B) Conn Connad benefits		(E)	(E)		Conn Colo				
Fees other than (G) (G) Conn tuition Rental of equipment (H) (H) (H) Conn Total direct costs No Item No. No Item No. Conn Grand Total No Item No. No Item No. Conn Same as 1., 9., and Section D - Report of Program Development Grants Area of handicap No Item No. (A) (A) Conn gersonal service (name and title, responsibility for PDG, amount expended Employed services (B) (B) (B) Conn Employed services		(F)	(F)		Conn Colo			_	
Total direct costs No Item No. Indirect costs No Item No. No Item No. Grand Total No Item No. No Item No. Same as 1., 9., and Section D - Section D - Report of Program Program Development Grants Area of handicap No Item No. No Item No. Compensation for Grants Grants and title, responsibility for PDG, amount expended Employed services (B) (B) (B)	Fees	(9)	(9)		Conn Colo				
Total direct costs No Item No. No Item No. Grand Total No Item No. No Item No. Same as 1., 9., and Section D - Section D - Report of Program Program Development Grants Area of handicap No Item No. (A) Compensation for (A) (A) personal service (name and title, responsibility for PDG, amount expended Employed services (B) (B)		. (н)	(н)		Conn Colo				
Indirect costs Grand Total Same as 1., 9., and Section D - Section D - Report of Program Development Program Development Grants Area of handicap Compensation for (A) Compensation for (A) Employed services Employed services (B) (Content of the content o		No Item No.			Conn Colo				
Grand Total Same as 1., 9., and Section D - Section D - Report of Program Development Development Grants Area of handicap Compensation for (A) personal service (name and title, responsibility for PDG, amount expended Employed services (B) (B)	23. Indirect costs	No Item No.	No Item No.		Conn Colo				
Same as 1., 9., and Section D - Section D - Report of Program Program Development Grants Area of handicap No Item No. No Item No. Compensation for (A) (A) personal service (name and title, responsibility for PDG, amount expended Employed services (B) (B)		No Item No.	No Item No.		Conn Colo				
Area of handicap No Item No. No Item No. Compensation for (A) (A) personal service (name and title, responsibility for PDG, amount expended Employed services (B) (B)	Same as 1., 11 above	ı E	(C)	ц	Conn Colo				
Compensation for (A) (A) personal service (name and title, responsibility for PDG, amount expended Employed services (B) (B)		No Item No.			Conn Colo				
Employed services (B) (B) and benefits			(A)		Conn Colo				
		(B)	(B)		Conn Colo				

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PROGRAM Special Education J(15)

	•	•	Federal/		- 1	Different		
Data Tvoe	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
	OE 9003	03						
29. Supplies and Materials	(2)	(3)		Conn Colo				
30. Communications	(a)	(a)		Conn Colo				
31. Reproduction and Duplicating	(E)	(E)		Conn Colo				
32. Travel	(F)	(F)		Conn Colo				
33. Rental of equipment	(9)	(9)		Conn Colo		,		
34. Grand total	No Item No.	No Item No. No Item No.		Conn Colo				
35. Comments	No Item No. No Item	No Item No.		Conn Colo	•-			
36. Same as l., 9., 11 and 25	Section E - Report of Administra- tive Costs	Section E - Report of Administra tive Costs		Conn Colo				
37. Professional staff to administer the program (name and title, responsibility, total amount)	(A1)	(A1)		Conn Colo				
38. Expenditures for: secretarial staff, support for intern- ship, employee ser- vice and benefits, honoraria for out- side consultants	(A1-5)	(A1-5)		Conn Colo				,

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PROGRAM Special Education J (16)

			Federal/		Ι.	Different		
Data Tone	Con Conn	Colo Corm E Item		Tdentical	Source	Time of	Category Breakout	Romanke
· ·	OE 9003		T	_				
39. Cost of travel (admin. travel of state staf, expenses for state screening committee and other meetings, in-service travel)	(B1-3)	(B1-3)		Conn Cold				
40. Other items (communication costs, supplies and materials, printing, rental of equipment)	(Cl-4)	(cl-4)		Conn Cole				
'41. Total	No Item No.	No Item No.		Conn Colc				
42. Comments	No Item No.	No Item No.		Conn Colc		•		
ASSURANCE OF COMPLIANCE WITH LEGAL REGULATIONS	EHA 1							
1. Signature of superintendant	No Item No.	CDE 2 P• 2			Conn Colo	0		Con atticut superintendent/Colorado special education administrator
FINANCIAL ALLOCATION AFFIDAVIT	EHA 2				•			
1. Signature of superintendant	No Item No.							
 Estimate of cash requirements - quarterly 	No Item No.							

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PROGRAM Special Education J(17)

			Federal/		1	Different		•
Data Type	Conn Col Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of	Category	Domestic
	EHA 3 Part I							
1. LEA	No Item No.	OE 9025 (10A)		Conn Colo				
2. Project No.	No Item No.	(111)		Conn Colo				
3. Grant award amount	No Item No.	(24)		Conn Colo				
4. Payments received	No Item No.	(54)					Conn Colo	
5. Project ending date	No Item No.	(15B)						
Expenditures for services	No Item No.	(25)	CPIR-IIIA 1-8				F/SS Conn Colo	F/SS
7. Total disbursements as of project ending date	No Item No.	(24 or 25)				Conn Colo		
8. Obligations for services	Part II							
 Fotal obligations as of project ending date 	as No Item No.							
10. Expenditures for materials	Part III	(25)					Conn Colo	
<pre>11. Total disbursements for materials as of project ending date</pre>	No Item No.	(25)					Conn Colo	
12. Obligations for materials	No Item No.							
13. Total obligations as of project ending da	No Item No. te							
						1		

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Special Education J (18)

			Fedenal/		α	Different		
Data Type	Conn Corn Form 6	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Rem arks
	ЕНА З				,			
14. Total grant award	Part IV							
15. Funds disbursed	No Item No.	(54)				Conn Colo		
16. Funds obligated	No Item No.							
17. Total funds dis- bursed and obligated	No Item No.							
18. Unobligated balance	No Item No.							
19. Signature of superintendent	No Item No.							
20. Item description, cost, etc.	Part V							
21. Signature of super-intendent assuring compliance with regulations	Part VI							
ATTACHMENT A - MINI- PROJECT GRANT	No Form No.							
1. Project title	No Item No.	(16)						
2. Name of LEA	No Item No.	(10A)			_			
 Signature of super- intendent 	No Item No.							
4. Date of transmission No Item No.	No Item No.							
 Name, etc. of principal investiga- tor 	No Item No.	(14)						·

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Special Education (19)

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	Remarks			F/SS combination Q29, Q11								Connecticut - asks when and who will conduct evaluation Colorado - does not
	Category Breakout		Conn Colo F/SS	Conn Colo F/SS								Conn Colo
Different	Time of Collection										٠	
	Source or Level			F/SS								
	Identical				Conn Colo					Conn Colo	Conn Colo	
, London	rederal/ State Variable		CPIR IB	ESS-Pu, Q11 ESS-Pu, Q29	,							
	Colo Form & Item		(21 A-B)	(21 A)	(15 A-B)					(16)	(12 B)	OE 9025 Part II Section B (1-5)
	Conn Corn Co	No Form No.	No Item No.	No Item No.	No Item No.	No Form No.	No Item No.	No Item No.	No Form No.	No Item No.	No Item No.	evalua-No Item No.
	Data Type		6. Whether project will mainly serve private school children	*7. Type of handicapped to be served	8. Start and end dates of project	ATTACHMENT B - LARGER GRANT Same as attach- ment A except for (6) substitute	1. Whether consultation No Item No. with private schools have been accomplished	2. If no, explain	ATTACHMENT C	l. Project title	2. Town	*3. Objectives by evaluation instruments

Special Education J(20)

			Federal/		ū	Different		
Data Type	Conn Form & Item	Col Form &	o State Item Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
NEEDS ASSESSMENT FORM	ED OTE	9106 30						
1. Type of handicap	No Item No.	Part II (1)-(13)	ESSPu, 011 ESS -Pu.	Conn Colo	F/SS		F/SS	F/SS combination Q11, Q29
•			029			-		
2. State	No Item No.	Part I (A)		Conn Colo				
<pre>3. Number of children, teachers, funds expended, etc.</pre>	No Item No.	Part II (a)-(g)	ESS -Pu, Q11 CPIR II		F/SS	Conn Colo	F/SS	
* 3a. Estimates, etc.	No Item No.	Fart II (a)-(g)	A,B,C CPIR III Al-8				F/SS	
<pre>% 4. Average per pupil expenditure - State</pre>	No Item No.	Part II (21)+(17)					Conn Colo	
* 5. Number of handicaps	No Item No.	Item No. (17)+(18)	CPIR,IC		-	-	Conn Colo	
* 6. Population lease used	No Item No.	Part II	2333		•			
* 7. Source	No Item No.	Part II		Conn Colo				
*8. Age range	No Item No.	Part II		Conn Colo				
REPORT OF PRE-SCHOOL MR PROGRAM OPERATED BY PARENTS ASSOCIATION	No Form No.							Colorado's report originates at the district level and is for all Special Ed Colorado gets form from county and
1. Name of Association	(1)	CDE 4	·		Conn Col			
2. Address of Association	(I)	CDE 4			Conn Col			

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Special Education J(21) PROGRAM

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Data Type	Conn Corn Co.	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
REPORT OF PRE-SCHOOL MR PROGRAM OPERATED BY PARENTS ASSOCIATION (Cont.	No Form No.							
3. Telephone Nc. of Association	(1)	CDE 4			Conn Col			
4. Address of Pre- school Program	(2)	CDE 4			Conn Col			
5. Telephone No. of Pre-school Program	(2)	CDE 4			Conn Col			•
6. Person in Charge	(3)	CDE 4			Conn Colo		1	
7. School Year	(3)	CDE 4		Coûn Colo	•			
8. Licensure (fire, death, etc.)	(†)							
<pre>* 9. Administration (narrative)</pre>	(5)							
*10. Administrative Policies (narrative)	(9)	-						
*11. Program Objectives (narrative)	(II 1)	OE 9025 Part II Section B (1-5)			Conn Colb			
12. Educational Planning	(2)							
13. Pupil Records (narrative)	(8)	(†)			Conn Col	0		
*14. Special Services	(†)							
^k 15. In-service Training	(5)		CPIR IIE 1-4				F/SS Conn	Connecticut is narrative
						-		

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Special Education J(22)

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Conn Colo St Form & Item Form & Item Vari	lo Item		State Variable	Identical	Source or Level	Time of Collection	Category Rreakout	Remarks
n B	n B							
(6) (3)	(3)				Conn Col			
(4)	(#)		ι		Conn Col	0		
(6)	(3)				Conn Col			
(III 1-7) CDE 4 pg. 17-25	± 17						Conn Colo	
(IV 1-16)								Individual class description not available in Colorado
(V 1-8) pg. 2-8	pg. 2-8						Conn Colo	
No Form No. OE 9025	OE 9025							
No Item No. (12)	(12)			Conn Colo				
(2,3,4,5,6, (18)(19) 7,8)	(18)						Conn Colo	
(1,9,29,30) Part II Section B	Hon						Conn Colo	
(10,12) (2)	(2)							
(11,13,14, (2) 15,16,17, 18,19)	(2)	<u>_</u> _	•				Conn Colo	

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Data Type	Conn Form & Item	Conn Colo	State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks
NTED (1969)	No Form No.	OE 9025						
* 6. Objectives	(20,21,22, 23,27,28)	Part T. Section B (1)					Conn Colo	
7. Kinds of materials available	(24,25,26)							
8. Adequacy of facilities and materials	(31)						,	
9. Teacher selection, experience, educa- tion	(32,33,34)							
10. Effectiveness of administration	(35,36,37, 38)	Part II Section A					Conn Colo	
*ll. Evaluation	(39,40,42)	Part II Section B (4)					Conn Colo	
12. Plans for future development	(41,43)							,
13. Problems in answer-ing questionnaire and general comment	No Item No.							
INVENTORY OF GIFTED AND NO Form No. TALENTED PROGRAMS (1971)	No Form No.							
1. Kind of student chosen	(1 1)				~į			
2. Criteria used	(I 2)							

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	(,	Federal/		- 1	Different		-1-
Data Type	Conn Correction Co.	Colo Form & Item	State Vari ab le	Identical	Source or Level	Time of Collection	Çategory Breakout	Remarks
NVENTORY OF GIFTED AND TALENTED PROGRAMS (1971) (Cont.)	INVENTORY OF GIFTED AND NO Form No. TALENTED PROGRAMS (1971) (Cont.)							
3. Adjunctive services	(I 3)	•	-					
Parental approval	(h I)							
Years in operation	(11 5)							
Type of program	(9 II)							
Emphasis of curri- cular content	(11 7)							
Amount of in- service training	(8 II)							
Evaluation .	(6 III)							
Growth of program	(111 10)	,			_			
Success of program	(11 11)							
SPECIAL EDUCATION DATA FORM.	ED042	OE 9025		_				
age or pre-	(1)	(21 A,b) (21 B)			Conn		Conn Colo	
Town/district code number	(2)(3)	(10 C)(12 C)			Conn			
Students reviewed, recommended,	(†	(21 A)		_	Conn		Conn Colo	
New students (instruction only recommended or non- instructional)	(8)(8)	(21 A(11))			Colo		Conn Colo	
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Data Type	Con Con Form 6	٠. ·	o State Item Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SPECIAL EDUCATION DATA FORM (Cont.)	ED042	OE 9025			1			
5. Count "in" "out"	(6)	((L,) A())			Conn		Conn Colo	
6. Number of staff	(10) (25)	(21 D)	•		Conn		Conn Colo	
7. Signature	No Item No.							
LIST OF COUNSELORS AND GUIDANCE DIRECTORS	No Form No.		•					
1. Number of pupils and grades served by counselors	(1)							
 Change in personnel and/or time for guidance 	(5)							
3. Indication vacancies	(3)							
4. Designation of head counselor	(#)							
5. Indication of system wide director of guidance	(5)							
6. New entry to list	(9)							
7. Check for no guidance personnel	No Item No.							
8. Check for list of personnel	No Item No.							

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Remarks | Source | Time of | Category | Identical | or Level | Collection | Breakout Time of Different Source ñ. Form & Item | Form & Item | Variable State Federal/ Colo No Form No. No Item No. (III A) (9 III) (III B) (III C) (d III) (III E) (III F) (II A) (II B) Conn (I A) (I B) (I C) (II) Information on State application received not received, accept able, not acceptable Data Type
APPLICATION REVIEW PRO-*10. Coordination rating Project number, fiscal year, title 7. Description rating Institution, date received, new, continuation and local funding Objectives rating evaluation rating dissemination and 4. Amount requested, reporting rating Project category 14. OE 9025 project * 9. Provisions for Provisions for FILE P.L. 89-313 6. Format rating *12. Budget rating entitlement *13. Mean rating 5 5. *11. ٦. е Э œ. ** ** * ** **

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	Conn					Time of	Category	, de la companya de l
	Form & Item Form	Form & Item	Variable	Identical	or Level	Collection	breakout	Kemarks
APPLICATION REVIEW PROFILE P.L. 89-313 (Cont.)	No Form No.							
%15. Recommendation	(v)							
Consultant signa- tures, date	No Item No.							
MENTALLY RETARDED CLASS PROGRAM ED009	ED009							
Town, school teacher, room size, location, teacher aide, school day, homeroom, review of placement. maximum enrollment	No Item No. (1-8)							
Activities taught by special class teacher regular teacher by where is instruction provided, average hours per week (boys, girls)	(9-14)							
Total hours instruc- tion per week	(15)							
APPLICATION FOR GRANT FOR A REGIONAL EDUCATIONAL FACILITY FOR EXCEPTIONAL CHILDREN	No Form No.							
	(1)							
2. Other participating towns	(2)							

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PROGRAM Special Education J(28)

		(Federal/		- 1	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remanks
APPLICATION FOR GRANT FOR A REGIONAL EDUCA- TIONAL FACILITY FOR EXCEPTIONAL CHILDREN (Cont.)	No Form No.					,		
3. Planned location of facility	(3)		•				-	
4. Estimated dates of construction	(†)						-	
* 5. Estimated total cost	(5)		•					
6. Years of use	(9)							
 Other school areas to be used for exceptional children 	(2)			-				
8. Necessity for program facility	(8)			_				
9. Signature, name of superintendant, town date	No Item No.							
*10. Type of exception- ability	(1)			• • •				
#11. Description of program	(1 1)							
12. Description of staff utilization	(I 2)	•						
13. Description of operation of facility	(II A)							
<pre>14. Allotment of seats</pre>	(II B)							
			-	7	_		1	

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PROGRAM Special Education J(30)

									·	<u> </u>	 ,	
	Remarks											
	Category Breakout	Conn Colo								•		
Different	Time of Collection						-					
	Source or Level	Colo		Conn	Conn	Conn	Conn					
	Identical											
Federal/	State Variable		•	-								
		Forms for Referral of Deaf,Blind Children CDE28/Regis- tration of Hind pupils in Colorado	schools CDE	No Item No.	No Item No.	No Item No.	No Item No.					
		No Form No	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	
		NOTIFICATION OF CHILDREN PLACED, IN NON-PUBLIC SCHOOLS	1. School district	2. Date	3. Name of child, date of birth, sex, address	4. Diagnosis	5. Kind of personnel making diagnosis	6. Recommendation	7. Personnel making recommendation	8. Name of non-public school recommended	9. Whether school districts anticipates developing program for this child	

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Special Education J(31) PROGRAM __

Dat: Type Conn				Federal /		А	Different	,	
Signature of director No Item No. Signature of Signatur		Conn Form & Item				Source or Level	Time of Collection	Category Breakout	Remarks
Signature of director No Item Of Special Education No. Whether contract is No Item No. Signature of No. CHARNY A - 1972 GRANT No Form OCHENY A - 1972 GRANT No Form OCHENY A - 1972 GRANT No Item No. (21 A) 1-8 Colo Number of handicapped No Item No. (21 A) 1-8 Colo Number of children No Item No. (21 A) 1-8 Colo Initial, continua- No Item No. (11 C) Conn Conn Conn Conn Conn Conn Conn Conn	NOTIFICATION OF CHILDREN PLACED IN NON-PUBLIC SCHOOLS (Cont.)								
Whether contract is on file or attached Signature of Sugnature of Color (21 A)	10. Signature of director of Special Education	r No Item No.							
Signature of superintendent No Item No. OE 9025 Project Title No Item No. C16) Conn Colo Project Title No Item No. (21 A(1-11)) Conn Colo Conn Colo Type of handicapped to be served No Item No. (21 A) CPIR,ID Conn Number of children No Item No. (24) Conn Colo Initial, continua- requested No Item No. (11 C) Conn Colo Initial, continua- tion of amendment No Item No. (11 C) Conn Conn Start and end dates No Item No. (15) Conn Conn	<pre>11. Whether contract is on file or attached</pre>	No Item No.					- -		
CHWENT A - 1972 GRAM No. Form OE 9025 Project Title No Item No. (16) Conn Colo Type of handicapped No Item No. (21 A(1-11)) Number of children No Item No. (21 A) Requested Mount of funds No Item No. (24) Conn Colo Conn Col		No Item No.							
Type of handicapped No Item No. (21 A(1-11)) Type of handicapped No Item No. (21 A(1-11)) Number of children No Item No. (21 A) CPIR,ID Conn Colo Amount of funds No Item No. (24) Conn Trequested Initial, continua- Tion of amendment Start and end dates No Item No. (15) Conn Conn Colo	ATTACHMENT A - 1972 GRANJ PROPOSAL UNDER P.L. 89- 313	r No Form No.	OE 9025						
Type of handicapped No Item No. (21 A(1-11)) Number of children No Item No. (21 A) CPIR,ID Conn requested Initial, continua- No Item No. (11 C) Start and end dates No Item No. (15) Conn Colo Conn Colo Conn Colo Conn Colo Colo	1. Project Title	No Item No.	(16)		Conn Colo				
Number of childrenNo Item No.(21 A)CPIR,IDConnF/SSF/SSAmount of fundsNo Item No.(24)ConnConnrequestedNo Item No.(11 C)ConnInitial, continua- tion of amendmentNo Item No.(11 C)ConnStart and end datesNo Item No.(15)Conn			(21 A(1-11)	_				Conn Colo	Could be identical since number of handicaps (Colo) can be made into type of handicaps (Conn)
Amount of funds No Item No. (24) Conn Colo Initial, continua- No Item No. (11 C) tion of amendment project Start and end dates No Item No. (15) Colo Colo	3. Number of children	No Item No.	(21 A)	CPIR,ID 1-8	Conn	_	F/SS	F/SS Conn Colo	
Initial, continua- No Item No. (11 C) tion of amendment project Start and end dates No Item No. (15) Colo	Amount of funds requested	No Item No.	(24)		Conn	_			
Start and end dates No Item No. (15)	Initial, continua- tion of amendment project	No Item No.	(11 c)			•		Conn Colo	
	Start and end dates	No Item No.	(15)		Conn				
			_						

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PROGRAM Special Education J(32)

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			Federal/		- 1	TILLETIC		
Data Type	Conn Form & Item	Colo Form & Item	State Va riabl e	Identical	Scurce or Level	Time of Collection	Category Breakout	Remarks
ATTACHMENT B - EVALUA- TION PLANS	No Form No.						_	
* 1. Objectives, evalua- tion instruments	No Item No.	Part II Section B (1) and (4)		Conn Colo				
STATEMENT OF EXPENDI- TURE TITLE I P.L. 89-10	No Form No.							
l. School district	No Item No.	(10 A)		Conn Colo				
2. Project number	No Item No.	(2)		Conn Colo				
3. Authorized carry over	No Item No.	(54)					Conn Colo	
4. Payments received for Fiscal 1970	No Item No.							
5. Total amount	No Item No.			•	_			
6. Project disbursement		No Item No (25)(26)(27)		Conn Colo				
7. Other salaries	No Item No.	(25)(27)			_		Conn Colo	
8. Total disbursement	No Item No.	(5 t C)		Conn Colo		-	-	
9. Project obligations (same as project disbursed)	No Item No.				_			
10. Facilities disbursement	No Item No (25(13-	(25(13-18))					Conn Colo	
<pre>11. Facilities obliga- tions</pre>	No Item No.							
l2. Total	No Item No.							
				•				

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PROGRAM Special Education J(33)

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	Remar ks																
	Category Breakout														F/SS Colo		
Differ ent	Time of Collection		······································									,					
	Source or Level																
	Identical				Conn Colo												
Federal/	State Variable														ESS-Tc, 056 ESS-Te,	(54,55, 58,59	
	Colo Form & Item				(24)					No Form No.	(1)	(2)	(3)	(†)	(5)		
	Conn Co.	No Form No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.								
	Data Type	TITLE I P.L. 89-10 (Cont.)	l2. (Cont.) a. Facilities	b. Project obliga-	c. Cash disbursed	13. Total obligated and disbursed	14. Unobligated balance	15. List of equipment items by cost, etc.	16. Estimate of monthly cash requirements	APPLICATION FOR SUPER- VISOR TRAINEESHIP P.L. 91-230	l. Name of applicant	2. Social Security No.	3. Date of birth	4. Whether U.S. citizen	5. Whether recieived a training grant from this office		

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PROGRAM Special Education

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		Remarks										
-		Category Breakout	1				F/SS Colo				F/SS Colo	F/SS Colo
	Different	Time of Collection		• • • • • • • • • • • • • • • • • • • •								
_		Source or Level										
	-	Identical					~					
	Federal/	State Variable					ESS-Te, Q45,58	•			ESS-Te,	ESS-Te, Q32 ESS-Te, Q34 ESS-Te, Q35
		Colo Form & Item	No Form No.	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)
		Conn Corm & Co.										
			APPLICATION FOR SUPER- VISOR TRAINEESHIP P.L. 91-230	6. Name and address of school in which employed	7. Telephone numbers	8. Home address	9. Kind of degree (name, B.A.,M.A., Specialist, others)	10. Certificate endorsed in area of specialization (EH,EMH, rural, speech) number of hours necessary for endorsement	<pre>11. Title of certificate (A,B,C,D,E, letter, others)</pre>	12. Name of college you plan to attend	13. Level and type of class you are teaching	<pre>14. Teaching experience last 3 years (posi- tion, employer, dates)</pre>

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Special Education J(35) PROGRAM

Remarks						•			
Category Breakout				_		F/SS Colo			
Different Time of Collection									
Source or Level				-					
T.Gentical									
Federal/ State		•				ESSTe, Q47,50			
Colo Form & Table	No Form No.	(15)	(16)	(16)	(17)	(19)	No Form No.	No Item No	No Item No
Con Con Co									•
	Data 1ype APPLICATION FOR SUPER- VISOR TRAINEESHIP P.L. 91-230	15. Colleges which you have attended(name, degree, major, dates)	<pre>16. List of associations of which you are a member</pre>	17. Signature of applicant	18. Statement of employer (name of applicant, area of specialization, signature, address)	19. Information from college (name, of applicant, area of specialization, name of college, courses, credit hours, date, signature)	ACCEPTANCE OF GRANT	l. Signature of acceptance date	2. Name of student, number of hours registered for, date signature of college official, title, college

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PROGRAM Special Education

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CDE 23
No Item No.
No Item No.
No item No.

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PROGRAM Special Education J(37)

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			Federal/		Α	Different		,
	Conn	Colo	State		Source	Time of	Category	
Data Type	Form & Item	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks
APPLICATION FOR APPROVAL OF HOME INSTRUCTION FOR EDUCATIONALLY HANDICAPPED (same as above except	CD	CDE 24						
ror /. above substitute 7a. Statement of Committee on educa- tional handicapped for physicians diagnosis	nosis	No Item No.						
NOTICE OF TERMINATION OF HOME-HOSPITAL TEACHING AND/OR HOME- TO-SCHOOL EQUIPMENT		CDE 25						
1. Child's name, district no., teacher, county, date service began, whether home/hospital teaching and/or home-to-schoolequipment		No Item No.						
2. Date service terminated home/hospital teaching, home-to-school equipment, hours per week by teacher, total no. of hours taught	ted 18.	No Item No.						
3. Same as 2. and 3. above		No Item No.						
APPLICATION FOR APPROVAL OF HOME-TO-SCHOOL EQUIPMENT		CDE 26						
l. School year		Ne Item No.						
2. District		No Item No.						

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Special Education J(38) PROGRAM

			Federal/		1	Different		
Data Type	Conn Corn Form 6	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
OF HOME-TO-SCHOOL EQUIPMENT (Cont.)	3	CDE 26						
3. County		No Item No.						
4. Name of child		No Item No.	•			•		
5. Date service began		No Item No.			-			
6. Committee signatures		No Item No.						
7. Cost of installing equipment		No Item No.	•	•	·			
8. Cost of monthly service		No Item No.						
9. Mountain States telephone number or independent company		No Item No.						
.10. Date signed		No Item No.	-			<u>-</u>		
ll. Signature of official		No Item No.				_		
FORM FOR REFERRAL OF DEAF-BLIND CHILDREN		CDE 28						
<pre>1. Name of father and mother</pre>		No Item No.						
2. Address of person making referral	_ ~-	No Item No.						

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PROGRAM Special Education J(39)

			Federal/	1	Ω	Different		
	Conn	• •				Time of	Category	
	Form & Item Form &	Form & Item	Variable	dentical	or Level	Collection	Breakout	עפווומניאט
REGISTRATION OF BLIND IN NON-PUBLIC SCHOOLS		CDE 117						
1. Grade		No Item No.						
2. School address		No Item No						
3. Parents name		No Item No.						
APPLICATION FOR REIMBURSEMENT OF SPECIAL EDUCATION SERVICES		CDE 2						
* 1. Personnel list of					•		-	
the following, by								
general information								
on classes taught by each, or services								
rendered by total no. of pupils enrolled by	· h							
by reason for leaving Personel by: * a. Special education	b .	No Item No						
director * b. Assistance special education director		No Item No						
c. Special education supervisor		No Item No		·				
d. Aurally handicapped		No Item No						
* e. Educable mentally handicapped		No Item No						
* f. Work experience/ study		No Item No						
* g. Educationally handicapped		No Item No						

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PROGRAM Special Education J(40)

			Federal/			Different		
Data Type	Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of	Category	O C
APPLICATION FOR REIM- BURSEMENT OF SPECIAL EDUCATION SERVICES (Cont.)		CDE 117		1				Namarks
* h. Physically handicapped		No Item No.						
* i. Specialty teachers		No Item No.						
* j. Speech correction- ists		No Item No.						
* k. Visually handicapped	<u>م</u>	No Item No.						
* 1. Home instruction of educationally handicapped		No Item No.						
* m. Home-Hospital physically handicapped	þed	No Item No.	•					
<pre>* n. Home to school telephone</pre>		No Item No.	_					
* o. School psychologist		No Item No.			-			
* p. School social workers		No Item No.		 .				
2. Special transporta- tion expenses		CDE 2			<u>-</u>			
3. Total actual cost to school district		No Item No.						
4. Less funds received under public trans- portation act		Vo Item No.						
5. Total cost	2	No Item No.						

personnel presentable politications (Edeland Statements)

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Special Education PROGRAM

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	1	Remarks													
		Category Breakout										,			
	Different	Time of Collection													
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711		Identical	·								•				
	Federal/	41				•									
		2, ~	CDE 117	No Item No.	CDE 4			No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.
		Conn Form & Item Form						-	w c		.T.			9 ed	
		Data Type	APPLICATION FOR REIMBURSEMENT OF SPECIAL EDUCATION SERVICES (Cont.)	6. Foster home maintenance expenses	APPLICATION FOR APPROVAL OF SPECIAL EDUCATION SERVICES	l. Personnel list of the following, by their salaries and general information	or classes taught by each, or services rendered personnel of:	a. Directors of special education	b. Assistance directors of special education	c. Special education supervisors	d. Educable handicapped	e. Educable mentally handicapped	f. Educationally handicapped	g. Physically handicapped	h. Speech correctionis

PROGRAM Special Education J(42)

	ana Ca	cout Remarks															
	fferent Time of Category	u o								_		_					
	Source Time of	7		•		-	- 					_					
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	Federal/	8															
	Colo	Form & Item	† 1	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	CDE 76	No Item No.	No Item No.
	Conn	Form & Item Form &		æ							•					7	
		Data Type APPLICATION FOR APPROVE	OF SPECIAL EDUCATION SERVICES (Cont.)	i. Visually handicapped	j. Specialty teachers	k. Work experience and study teachers	<pre>l. Home instruction- educationally handicapped (E.H.)</pre>	m. Home/hospital instruction physically handicapped (P.H.)	n. Psychologist	o. Social workers	p. Psychiatrists	q. Special transportation	r. Foster home maintenance	s. Pupil list with admission data	SPECIAL EDUCATION COSTS	1. District	2. Name of person completing form

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Special Education J(43) PROGRAM

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Data Type	Conn Colo	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SPECIAL EDUCATION COSTS (Cont.)		CDE 76						
FTE of all instructional personnel		(1)						
4. Percent of salary assumed by the distributor for PERA plus other benefits		(2)						
5. ADA of the following classes: AH, EMH, EH, PH, work study, home instruction EH, and PH	•	(3)						
6. Salary of secretary		(#)						
for Special Education personnel by (Director- Assistance Director- Supervisor, Psycholo- gist - social worker, specialty teachers, hinerant teachers, cothers)	L	(3)		• 				
8. Cost of maintaining central office staff by (same as in 7. above excluding "hinerant teachers" and "other"		9)	· .	•				
Tuition costs from other districts, child's name, district of attendance		(7)						

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PROGRAM Special Education J(44)

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			Federal/			Different		•
Data Type	Conn Form & Item	Item Form & Item	State Variable	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
SPECIAL EDUCATION COSTS (Cont.)		CDE 76						
%10. Foster home maintenance		(8)						
<pre>11. Costs other than salary for home instruction</pre>		(6)	_					
*12. Estimate of average number of hours per child per day in		(10)						
Special Education by (AH-resource, EH-resource, EH itinerant, speech correction, VH-resource, VH-itinerant	ť.t							
INSTRUMENT FOR EVALUATING NO Form No. PROJECT PRUPOSALS	No Form No.	-						
l. Program	No.Item No.							
2. Title, fiscal year, applicant, evaluator, date	No Item No.		_					
<pre>% 3. Proposal content checklist</pre>	(a-g)							
<pre>% 4. Statement of need checklist, ratings, mean rating</pre>	(I a-d)			~				
<pre>% 5. Performance objectives(II checklist, ratings, mean rating</pre>	s(II a-c)		,	. 4	,		-	
# 6. Interventions check- list, ratings, mean	(III a-f)							

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		or Level										
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		Identical										=
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	5	-										
		Form & Item Form &	G No Form No.	(IV a-e)	(V a-i)	No Item No.	ce (VI a-c)	No Item No.				
		Data Type	INSTRUMENT FOR EVALUATING PROJECT PROPOSALS	<pre>% 7. Evaluation strategy checklist ratings, mean rating</pre>	* 8. Budget checklist, ratings, mean rating	* 9. Mean total rating Section I-V	<pre>%10. Practical significance checklist, ratings, (V) mean rating</pre>	*11. Recommendation checklist and comments				

ADULT BASIC EDUCATION PROGRAM



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PROGRAM Adult Basic Education K (1)

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			Federal/			Different		· · · · · · · · · · · · · · · · · · ·
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ADULT BASIC EDUCATION	0E 3058	OE 3058			Conn.Col	Ċ		Very similar to Conn.
ALMOAL FROSKAM					OE 3058			ED 037 ABE Annual
					037, Colo			47 ABE Annual Report
-					CDE 47)			Both state forms come
					through- out			rrom LEA. OE 3058 comes from State
	Part I	Part I						
*1. Total no. of students	ED 037 A1	Ala CDE 47 No Item No.		Conn. Colo				
* A. By 3 grade levels	Ala(1-3) ED 037 IAla(1-3)	Ala(1-3) CDE 47 No Item No.	CPIR, ID 1-8	Conn. Colo	F/SS		F/SS, Conn Colo.	F/SS - district level
* B. By sex	Alb(1-2) ED 037 IAlb(1-2)	Alb(1-2) CDE 47 No Item No.		Conn.Colo.				
* C. By age range	Alc(1-6) ED 037 IAlc(1-7)	Alc(1-6) CDE 47 No Item No.		Conn.Colo. (OE) Colo.Colo.			Conn.Conn.	
* D. By race	Ald(1-5) ED 037 IAld(1-3)	1d(1-5) A1d(1-5) CDE 47 IAld(1-3) No Item No.		Conn.(. 10, (OE)			Conn.Colo. [Conn.Colo. OE]	
*2. No. of students				_				
* A. By ethnic	A2a(1-3) A2a(1-3 ED 037 CDE 47 IA2a(1-5) No Item	A2a(1-3) CDE 47 No Item No.		Conn.Colo (OE) Colo.Colo			Conn. Conn.	
* B. By type of institu- tion	A2b(1-3) A2b(1-3 ED 037 CDE 47 IA2b(1-3) No Item	A2b(1-3) CDE 47 No Item No.		Conn.Cola. (OE) Conn.Conn.			Colo. Colo.	
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PROGRAM Adult Basic Education R(2)

Conn Colo Form & Item OE 3058 Part I A2c A2c ED 037 IA2d A3a ED 037 IA3a A3b ED 037 IA3b CDE 47 IA3b A4 ED 037 IA3b CDE 47 IA3b A3b CDE 47 IA3c No Item No. A4 A4 A4 CDE 47 IA3b CDE 47 IA3b CDE 47 IA3b CDE 47 IA3c No Item No. A4 A4 A4 A4 CDE 47 IA3b CDE 47 IA4 No Item No. A4 ED 037 No Item No. A4 ED 037 IA4 No Item No. A4 ED 037 IA5a No Item No. IA5a A5a A5a A5a A5a A5a A5a A5				Fodons /			Different		
DE 3058 Part I Part I Com.Cold Com.ED 037.00102 A2C A2C CDE 47) Intrough OUL A2d A2d COM.Colo ED 037 COB 47 Com.Colo C	_	Conn Form & Item	Co. Form &	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
## A3a	ION nt.)	OE 3058 Part I	OE 3058 Part I	,		Conn.Cok OE 3058 (Conn.ED 037,Colo CDE 47) through-			
A2d A2d (OE) CDE 47 COE) A3a A3a A3a A3b CDE 47 Conn.Colo. ED 037 CDE 47 IA30 No Item No. ED 037 CDE 47 IA4 A4 CDE 47 IA4 No Item No. A4 A4 CDE 47 IA4 No Item No. A4 A4 CDE 47 IA4 No Item No. A4 A4 CDE 47 IA4 No Item No. Conn.Colo. Colo. Colo. Colo. Colo. Colo. Colo. Colo. C		A2c ED 037 IA2c	A2c CDE 47 No Item No.		Conn.Colo (OE) Conn.Conn			Colo.Colo.	F/SS -
A3a	re-	A2d ED 037 IA2d	A2d CDE 47 No Item No.		Conn.Colo (OE) Conn.Conn			Colo. Colo.	
A3a	of new								
A3b CDE 47 IA3c No Item No. A4 A4 A4 ED 037 CDE 47 IA4 No Item No. A5a A5a ED 037 CDE 47 IA5a No Item No.	New for nation and state	A3a ED 037 IA3a	A3a CDE 47 No Item No.		Conn. Colo				
A4 A4 CDE 47 LA4 No Item No. A5a A5a ED 037 CDE 47 IA5a No Item No.	Not new for nation, new for state	A3b ED 037 IA3b	A3b CDE 47 No Item No.		Conn.Colo				
A5a A5a ED 037 CDE 47 IA5a No Item No.	*4. No. completing be- ginning level	A4 ED 037 IA4	A4 CDE 47 No Item No.		Conn. Colo	•			
A5a A5a ED 037 CDE 47 IA5a No Item No.	*5. No. completing intermediate level who began at:								
	* A. Beginning level	A5a ED 037 IA5a	A5a CDE 47 No Item No.		Conn. Colo	·•			

New York

PROGRAM Adult Basic Education K (3)

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Data Type	Conn Co Form & Item Form &	Coio Form & Item	St ate Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ADULT BASIC EDUCATION ANNUAL PROGRAM (Cont.)	OE 3058 Part I	OE 3058 Part I			Conn. Colo. OE 3058 (Conn. ED 037, Colo. CDE 47)			
* 5B. Intermediate : cvei	A5b ED 037 IA5b	A5b CDE 47 No Item No.		Conn. Colo	out out			·
* 6. No. completing ad- vanced level who began at:				4000				
* A. Beginning level	A6a ED 037 IA6a	A6a CDE 47 No Item No.		Conn.Colo				
* B. Intermediate level	A6b ED 037 IA6b	A6b CDE 47 No Item No.		Conn.Colo.				
* C. Advanced level	A6c ED 037 IA6c	A6c CDE 47 No Item No.		Conn. Colo.				
*7. No. of separations by 3 grade levels	A7(a.c) ED 037 IA7(a-c)	A7(a-c) CDE 47 No Item No.	•	Conn. Colo.				
*8. No. of separations by 6 reasons	A8(a-f) ED 037 IA8(a-f)	A8(a-f) CDE 47 No Item No.		Conn.Colo. (OE) Conn.Conn.			Colo.Colo.	
* 9. No. hours of member-ship	A9 ED 037 IA9	A9 CDE 47 No Item No.	-	Conn.Colo		-	-	

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PROGRAM Adult Baric Education K(4)

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Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of .	Category Breakout	Remarks
ADULT BASIC EDUCATION ANNUAL PROGRAM (Cont.)	OE 3058 Part I	OE 3058 Part I			Conn.Colo. OE 3058 (Conn.ED 037,Colo. CDE 47) through-			
No. classes held by location	B10 ED 037 IB10	B10 CDE 47 No Item No.		Conn.Colo. (OE) Conn.Conn.			Colo.Colo.	
Average no. of hours to complete by 3 grade levels	C11 ED 037 IC11	C11 CDE 47 No Item No.		Conn, Colo,				
*12. No. teacher training workshops by state, local	C12 ED 037 IC12a	C12 CDE 47 No Item No.		Conn.Colo, (OE) Conn.Colo, (ED 037 & CDE 47)			local - state level	District level forms list only no. in district; these are identical at this level
*13. No. receiving pre- or in-service training	Bl%a-c) ED 037 IC13	Bl3(a-c) CDE 47 No Item No.	CPIR, IIE 1-4	Conn.Colo. (OE)	F/SS		Conn.Colo. Conn.Colo. OE} F/SS	Only state level OE forms are identical F/SS district level
14. Programmed instruction							-	
No. of classes	C14a ED 037 IC14a	C14a CDE 47 No Item No.		Conn.Colo.				
* B. No. of students	C14b ED 037 IC14b	C14b CDE 47 No Item No.		Conn.Colo.				
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PROGRAM Adult Basic Education K (5)

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		Category Breakout			,					Conn. Conn.
	Different	Time of Collection	•							
		Source or Level	Conn.Colo DE 3058 (Conn.ED 037,Colo. CDE 47) through-	.•	_ •	•	•			
(2)		Identical		Conn.Colo	Conn.Colo	Conn. Colo	Conn. Colo	Conn.Colo.		Conn.Colo. (OE)
×	Federal/	State Variable								
		Colo Form & Item	0E 3058 Part I	C14c(1-3) CDE 47 No Item No.	D15(a,b)	D16(a,b)	D17(a,b)	D18(a,b)		D19a1
		Conn Co. Form & Item Form &	OE 3058 Part I	C14c(1-3) ED 037 IC14c(1-3)	D15(a,b) ED 037 ID15(a,b)	D16(a,b) ED 037 ID16(a,b)	D17(a,b) ED 037 ID17(a,b)	D18(a,b)		D19a1 ED 037 ID18
		Data Type	ADULT BASIC EDUCATION ANNUAL PROGRAM (Cont.)	14C. Average no. of hours to complete by 3 grade levels	*15. ABE teachers - no. and aggregate hrs. of instruction	*16. Counselors - no. and aggregate hrs. of counseling	*17. Local supervisory personnel - no. and hours of aggregate supervision	*18. State administration D18(a,b) and supervisory personnel - no. and aggregate hours of admin. and super- vision	19. All other personnel	* A. Local level - no.

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Data Type	Conn Corn Form &	Colo Form & Item	-	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ADULT BASIC EDUCATION ANNUAL PROGRAM (Cont.)	OE 3058 Part I	OE 3058 Part I			Conn.Colo OE 3058 (Conn.ED			
			_	<u>.</u>	037,Colo CDE 47) through-			
19B. Local level aggre- gate hours	D19a2	D19a2		Conn.Colo.				
C. State level - no. and aggregate hours	D19b(1-2)	D19b(1-2)		Conn. Colo.	_			
20. No. of local advisory committees	E20	E20		Conn.Colo.				
21. Is advisory committee operating	E21 ED 037 IE19	E21 CDE 47 No Item No.	ESS-Di, Q8	ESS-Di, Q8 Conn. Colo. Conn. Colo (OE) F/SS	Conn. Co la F/SS			In Conn. and Colo. local forms ask about local committee; in State forms ask for State Committee; F/SS district level
22. Meeting dates of local advisory committee	ED 037 IE19	·						
23. Period covered, date, state	No Item No.	No Item No.		Conn.Colo.				
24. Name and signature of state director	No Item No. No Item	No Item No.		Conn.Colo.				

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PROGRAM Adult Basic Education K(7)

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Data Type	Conn Corn Form &	257		Identical	Source or Level C	Time of Collection	Category Breakout	Remarks
ADULT BASIC EDUCATION ANNUAL PROGRAM (Cont.)	OE 3058 Part II	OE 3058 Part II			Conn.Colo. OE 3058 (Conn.ED 037,Colo. CDE 47) through-			
*25. Describe special projects and no. of students	A ED 037 IIA	4		Conn.Colo.				
*26. Describe accomplishments of students	B ED 037 IIB	B CDE 47 No Item No.		Conn.Colo.	-		Colo. Colo.	
*27. Describe activities with cooperating agencies	C ED 037 IIC	O		Conn.Colo.				
*28. Describe problems	D ED 037 1.ID	Q		Conn. Colo.				
*29. Describe instruc- tional materials	E BD 037 IIE	ы		Conn. Colo.				
ED 937 ADULT BASIC EDUCA- TION ANNUAL REPORT	- ED 037							
*1. Funds expended		_					_	
* A. Federal	la	CDE 88 No Item No.	CPIR, IIIA 1-8	CPIR, IIIA Conn. Colo			F/SS, Conn. Colo.	
* B. State	: 1b		CPIR, IIIA 1-3				F/SS, Conn.	

PROGRAM Adult Basic Education K(8)

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			Federal/		A	Different		
Data Type	Conn Conn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Renarks
ED 037 ADULT BASIC EDU- CATION ANNUAL REPORT (Cont.)	ED 037							
*1C. Local	lc	CDE 88 No Item No.	CPIR, IIIA 1-8	Conn.Colo			F/SS, Conn. Colo.	
*2. Total cost of program	5	CDE 88 No Item No.	CPIR, IIIA 1-8	CPIR, IIIA Conn.Colo	•		F/SS, Conn. Colo.	
*3. Total cost of admin- istration	က		CPIR, IIIA	Conn.Colo	•_		F/SS, Conn.	
4. Town, signature, date	No Item No.							
CDE 47 ANNUAL REPORT		CDE 47						
l. Marital status - 5 categories		No Item No.						
 Highest grade completed by student - 6 categories 		No Item No.						
3. Average no. of dependents		No Item No.		-				
4. Primary language in home		No Item No.						
5. Students referred by - 8 categories		No Item No.						
6. Reason for student participation - 4 categories		No Item No.		-				
7. List organizations represented on committee		No Item No.						

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PROGRAM Adult Basic Education K (9)

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	Remarks												nn. F/SS - month and year of birth
	Category Breakout							_					F/SS, Conn.
Different	Time of Collection	_											
	Source or Level				·		.			•			F/SS,Com.
	Identical					~	Conn. Colo		Conn.Colo	Conn.Colo	Conn.Colo	Conn.Colo	
Federal/			•			·							ESS -Pu, Q3a,b
	Colo Form & Item	CDE 47	No Item No.	No Item No.	No Item No.	Adult Ed. Cumulative Record CDE/ABE Form 3	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	
	Conn Form & Item					ABE Form l		No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.
	Data Type	CDE 47 ANNUAL REPORT (Cont.)	8. Identify committee members from the undereducated community	9. No. of employees by 6 categories indigenous to target population	10. Name, position, address	ADULT BASIC EDUCATION	1. Name, address, phone No Item No.	2. Town, no.	3. Social Security No.	4. Formerly enrolled elsewhere	5. Where formerly enrolled	6. Age, sex	7. Country of birth, date No Item No. of birth, years in

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PROGRAM Adult Basic Education K(10)

			Federal/		1	Different		-
Data Type	Conn Form & Item	Colo Form & Item	-	[dentical	Source or Level	Time of Collection	Category Breakout	Remarks
ADULT BASIC EDUCATION (Cont.)	ABE Form 1	CDE/ABE Form 3						
8. Marital status, no. of dependents	No Item No.	No Item No.		Conn.Colo.				
* 9. Employer, occupation No Item No.	No Item No.							-
10. Receiving public assistance and from whom	No Item No. No Item	No Item No.					Corn.Colo.	
ll. Highest grade com- pleted	No Item No. No Item	No Item No.					Coun.Colo.	
*12. Course level in which enrolled	No Item No.							
13. Ethnic background and race	No Item No. No Item	No Item No.					Conn.Colo.	
14. Student referred by	No Item No.	No Item No.	-				Conn.Colo.	
15. Learned of program from	No Item No.							·
16. Reason for partici- pation	No Item No.	No Item No.					Conn.Colo.	
<pre>17. Other pertinent information</pre>	No Item No.							
18. Place of instruction	No Item No.							
19. Testing record	No Item No.							
20. Date of initial en- rollment, date of re-enrollment	No Item No. No Item	No Item No.					Conn.Colo.	Colo present date only
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PROGRAM Adult Basic Education K (11)

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Data Type	Conn Conn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ADULT BASIC EDUCATION (Cont.)	ABE Form 1	CDE/ABE Form 3						
Reason for separa- I	No Item No.	No Item No.					Conn.Colo.	
Rating on behaviors No Item No.	No Item No.							
Total clock hours of instruction by year	No Item No.							
Behavioral changes in human terms	No Item No.	No Item No.		•			Conn.Colo.	
Information supplied No	No Item No.							
Is this first time student enrolled in ABE		No Item No.						
Student is: in correctional institute, state hospital, migrant		No Item No.						
Employment status								
A. At registration - 5 categories		No Item No.						
At separation - 5 categories		No Item No.						
Primary language in home: S anish, English, ocher		No Item No.				•		

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PROGFAM Adult Basic Education K(12)

			Federal/		A	Different			
Data Type	Conn Corn Form &	lo Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks	
ADULT BASIC EDUCATION (Cont.)		CDE/ABE Form 3							
30. Effective reacing grade level, at registration and separation		No Item No.							
31. Dates for entering, separating, and completing- 3 levels		No Item No.	•				-		
32. Student's physical needs		No Item No.							
33. Counseling record		No Item No.				_	•		
34. ABE PROGRAM APPLICATION ED 026	ED 026	Project Appl. CDE 46							
*1. Town or name of agency	No Item No.	No Item No. No Item No.		Conn.Colo,		-			
2. Address		No Item No.							
3. Completed by, date	No Item No.			•		_			
4. Signature and Date	No Item No.	No Item No. No Item No.		Conn. Colo					
5. Title		No Item No.							

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PROGRAM Adult Basic Education K (13)

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Data Type	Conn Con Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
ABE EQUIPMENT INVENTORY ED 034	EĎ 034	Inventory of Non-Con- sumable Material CDE 88						
1. District	No Item No.	No Item No.		Conn.Colo				
2. Completed by, date	No Item No.		٠					
3. County, District, Number		No Item No.						
4. Information per Item	No Item No.	No Item No.					Conn. Colo.	
ABE BUDGET CDE 46		CDE 88 CDE 46			_			
ABE REIMBURSEMFWT REQUEST CDE 88							,	
* 1. District		CDE 88 CDE 46 No Item No.				Colo. Colo.		
Project No. Period Covered		CDE 88 No Item No.						
* 3. Personnel		CDE 88 CDE 46 1 A-F				Colo. Colo.	Colo. Colo.	
*4. Materials		CDESS CDE 46 2 A-E				Colo.Colo.	Colo. Colo.	
5. Travel		CDE 88 . CDE 46 3				Colo. Colo.	Colo. Colo.	

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PROGRAM Adult Basic Education * (14)

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Data Type	Conn Form & Item Form	Colo Form & Item	State Variable	Jdentical	Source or Level	Time of Collection	Category Breakout	Remarks
ABE BUDGET CDE 46 (Cont.)								
* 6. Other Expenditures		CDE 88 CDE 46 4 A-D				Colo.Colo.	Colo. Colo.	
7. Total Cost of Project		CDE 46 No Item No	CPIR IIIA 1-8				F/SS Colo.	
8. Less 10% Local Contribution		CDE 46 No Item No.		_				
9. Total Local Expenditures		CDE 88 5						
채O. Total Federal Funds		CDE 88 6 CDE 46 No Item No.	CPIR IIIA 1-8			Colo. Colo.	F/SS Colo. Colo.	
*11. Payments Received to Date		CDE 88						
12. Total 10 & 11		CDE 88						
13. Remaining Funds		CDE 88						
14. All Funds Requested for Reimbursement for non-consumable Items		CDE 88 No Item No.						
		CDE 88 No Item No.						
nature, Dates, Vaucher No. Bate Mailed, Initial								

PROGRAM Adult Basic Education K(15)

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	Conn	Colo	Federal/ State		Source	Time of	Category	
Data Type	Form & Item Form &		Variable	Identical	or Level	Collection	Breakout	Remar ks
PROJECT PROPOSAL CDE 46								
* 1. Name and Address of Agency		No Item No.						
2. Name of Director		No Item No.	•					
3. Program Begin and End		No Item No.						
*4. No. of weeks planned, no. of students, no. of classes		No Item No.	CPIR, 4C				F/SS, Colo.	F/SS No. of students
5. Days that daytime classes meet, class hours, total per day		No Item No.						
6. Days that evening classes meet, class hours, total hours per evening		No Item No.						
7. Total no. hours of instruction		No Item No.						
8. Cooperating agencies and role	<u> </u>	CDE 46 No ltem No.				•		
*9. Subject areas to be taught		No Item No.						
CONTACT CDE 46		CDE 46 .						
1. Date		No Item No.						
2. Agency		No Item No.	 -					
*3. Funds Agreed Upon		No Item No.	•					

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PROGRAM Adult Basic Education K(16)

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		(Federal/		- 1	Different		
Data Type	Con Con Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of	Category	S C C C C C C C C C C C C C C C C C C C
CONTACT CDE 46 (Cont.)								04.10
4. Commissioner of Ed. Signature, Author- ized Representative, Title and Agency		No Item No.						
ADULT BASIC EDUCATION SURVEY		No Form No.						
l. Program, Address, Director		No Item No.	-					
 Materials utilized in program (check list) 		IA						
3. Were materials borrowed from LEA		IB			<u> </u>			
*4. What agencies assisted in training personnel (check list)) IC						
*5. Problems in recruit- ing (check list)		e:						
*6. Educational level of teachers (check list)		Ħ						
7. Means used to spread information on classes (check list)		IF						
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PROGRAM Adult Basic Education R(17)

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		Remarks					F/SS may or may not be different by source or	level					
		Category Breakout					F/SS Colo.						
	Different	Time of Collection					_ . _						
		Source or Level					F/SS Colo						-
, , , , , ,		Identical											
4	Federal/	State Variable					ESS-Di, Q8						
		Colo Form & Item	No Form No.	IG	Ш	II	ŢŢ	IJ (1-3)	IJ4	IIA	IIB		
		Conn Corn Form 6 I						•					
		Data Type	ADULT BASIC EDUCATION SURVEY (Cont.)	8. % referred for medical attention	9. Tests used in placement and evaluation	10. Local cash contribution in Board of Ed. minutes	 Existence of local advisary committee 	12. Did committee serve programs other than ABE, # meetings held, was purpose of committee to promote ABE	13. Committee involved in (check list)	*44. What CDE assistance would benefit most (check list)	#15. Rank of additional classes that would be beneficial (List)		

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PROGRAM Adult Basic Education K(18)

Data Type For ADULT BASIC EDUCATION SURVEY (Cont.)			Federal/		a	Ditt.cent		
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LT BASIC EDUCATION VEY (Cont.)	em:	Form & Item	State Variable	Identical c	Source or Level	Time of Collection	Category Breakout	Remarks
		No Form No.			_			
*16. Should it correlate with occupational program, which program, would assistance be needed		116 (1-2)	•					
*17. Description of program	•	IIIA						
*18. Difficulties of program		IIIB						
*19. How can SDE serve program		IIIC		•				
ABE QUARTERLY EXPENDI- TURE ESTIMATE ED 028 MONTHLY/QUARTERLY	ED 028							
*1. Town, completed by, No Item No.	o Item No.	_		_				
2. Cash requirements No by month or quarter	No Item No.						,	
3. Total No	No Item No.							
4. Signature of Supt. No of schools, date	o Item No.						•	
ADULT BASIC EDUCATION AFFIDAVIT ED 027	ED 027							
*1. Town, completed by, No Item No.	o Item No.							

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PROGRAM Adult Basic Education K(19)

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	Conn				Source	Time of	Category	
Data Type	Form & Item Form &	Form & Item	Variable	Identical	or Level	Collection		Remarks
ADULT BASIC EDUCATION AFFIDAVIT ED 027 (Cont.)	ED 027							
2. Date-assurance of compliance	No Item No.				-			
3. Signature of Supt. of schools, date, town	No Item No.							
4. Signature, fiscal officer, date, town	No Item No.						_	
C.O. 17E ABE - Certifica- tion by State of funding	C.O. 17E ABE			_				
<pre>l. Town, project no. payment amount</pre>	No Item No.					-		
2. Signature-director of instructional services, date	No Item No.							
ABE QUARTERLY PROGRAM REPORT ED 030	ED 030							٠
 Town, completed by date, period covered 	No Item No.							
*2. Total target pop- ulation at begin of quarter	8							
*3. # of students en- rolled during quar- ter by 3 grade level and total	9 "E		CPIR, ID (1-8)			F/SS Conn.	F/SS Conn.	
*4. # at end of last quarter	7		CPIR, ID (1-8)			F/SS Conn.	F/SS Conn.	

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PROGRAM Adult Basic Education K (20)

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Data Type	Conn Col Form & Item Form &	Colo Form & Item	State Variable	[dentical	Source or Level	Time of Collection	Category Breakout	Remarks
ABE QUARTERLY PROGRAM REPORT ED 030 (Cont.)	ED 030							
5. # at end of this quarter	&		CPIR ID (1-8)			F/SS Conn.	F/SS Conn.	
6. # of teachers at end of this quarter	6					_		
7. # separated during quarter by completed 8th grade, for employment, other reasons, total	10-13	,						
8. Cumulative total # of graduates since program began	14							
* 9. Cumulative total # of students since began	15							
*10. Target population remaining at end of quarter	16							
ANNUAL EXPENDITURE FOR ADULT BASIC EDUCATION - STATE GRANTS OE 3119 PART I	OE 3119	OE 3119						
* l. Expenditures cate- gories by Federal, State and Local	SEC A	SEC A	CPIR IIIA (1-8)	Conn. Colo.		μ, Ο	F/SS Conn.Colo.	
2. Expenditures by item	SEC B	SEC B	CPIR IIIA (1-8)	Conn. Colo,		<u> </u>	F/SS Conn. Colo.	

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PROGRAM Adult Basic Education.
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			Federal/		0	Time of	Category	
Data Type	Conn Form & Item	Conn Colo Form & Item Form & Item	State Variable	Identical	-d	Collection		Remarks
ANNUAL EXPENDITURE FOR ADULT BASIC EDUCATION - STATE GRANTS OE 3119 PART I (con:.)	OE 3119	OE 3119						
Statistical data for state adminis- tration, special projects, teacher training, demonstra- tion projects	SECC	SEC C		Conn.				
Certification of maintenance of effort	SEC D	SEC D		Conn.				
	OE 3119	OE 3119						
Summary of cash balances	SEC A (1-3)	SEC A (1-3)		Colo.				
2. Total federal funds available	SEC A (4-6)	SEC A (4-6)						
Adjustments to prior years, expenditures reports	SEC B	SEC B						
Summary of current fiscal year allot- ment	SEC C	SEC C	CPIR IIIA (1-8)				F/SS Conn. Colo.	F/SS Tocal Federal
Signature of state fiscal officer, title date of certification	- 1 e	·						

PROGRAM Adult Basic Education K(22)

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	Remarks							
	Category Breakout							
Different	Time of Collection							
	Source or Level					 		
	Identical							
	rederal/ State Variable			•				<u> </u>
	e m							
	Conn Come Colo	No Form No.						
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	Conn				_	Time of	Category	
Data Type	Form & Item Form &	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks
ANNUAL REPORT OF FEDERAL ASSISTANCE PROGRAM	OE 4125	OE 4125		Conn.Colo			·	
	(1)	(1)	-	Conn.Colo.				
2. Fiscal year ending	(2)	(2)		Conn. Colo.				
Administration - Acquisition	(3,3a)	(3,3a)		Conn. Colo.				
Total costs of approvable projects	(4)	(4)		Conn. Colo				
	Sect.AI	Sect.AI		Conn. Colo.				
Object of expendi- tures by amount	Sect.AII	Sect.AII		Conn. Colo.				
Program participation by number and enroll- ment	Sect.B (1,2,3)	Sect.B (1,2,3)		Conn. Colo.				
Expenditures for equipment and remodel ing by subject area	Sect.CI (A-H), II	Sect.CI (A-H), II	CPIR, IV C1	F/SS Conn. Colo.	-			
Grant awards, expenditures, and balances by equipment, materials and minor remodelling, administration of State Plan.	Sect.D (1,2,3)	Sect.D (1,2,3)	ţ	Conn. Colo.				
Adjustments to expenditures for previous fiscal year	Sect. E	Sect.E		Conn. Colo.				

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	Remarks							•
	Category Breakout							
Different	Time of Collection							
	Source or Level							
	Identical	Conn. Colo	Conn. Colo	Conn.Colo.	Conn. Colo.	Conn. Colo.	Conn. Colo.	Conn. Colo.
Fedenal/		•						
	Colo Form & Item	OE 4131 (1)	(2)	(3)	(4)	(5)	99	(7)
	Conn Conn Form 6	OE 4131 (1)	(2)	(3)	(4)	(5)	(9)	(7)
	Data Type	ANNUAL REPORT * I.D. Data *1. List program objec-	tives 2. Description of management activities	*3. For objectives (#1) Jescription of degree of achievement	4. Description of projects	5. Proportion of local schools reimbursed more than 50%, 50%, less than 50%	*6. Objective evidence of current and anticipated State- wide needs for specific types of equipment and materi- als which are con- sidered essential for improving educa- tion	7. Objectives that will continue and any possible new ones

		Rem arks									•		
		Category Breakout		Conn. C~10.	_	Conn. Colo. F/SS	Conn.Colo. F/SS	Conn.Colo. F/SS	Conn.Colo.				
	Different	Time of Collection											
		Sower or nevel									•	•	•
		Identical		,	F/SS, Conn			CPIR,IVC1 Conn.Colo			Conn.Colo.	Conn.Colo	Conn. Colo
(C) 7	Federal/	- 41			ESS-Pr, Qla	CPIR, IVC1	CPIR, IVC1	CPIR,IVC1					
		lo Item	CDE 78	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	6-AF-2-6	No Item No.	No Item No.	No Item No.
		Conn Conn Form &	NDEA, III85- 864-II	No Item No. No Item No.	No Item No. No Item No.	No Item No.	No Item No.	No Item No. No Item No.	No Item No.	NDEA, III85- 864-I	No Item No.	No Item No.	No Item No.
		Data Type	COST CATEGORY OF PROJECT NDEA, II185-APPLICATION NUMBER 864-II	1. Name of school	2. Grades in school	3. Equipment (other thanNo Item No. No Item No. audio-visual - a; audio-visual - b)	4. Materials (printed - No Item No. No Item No. c; audio-visual - d)	5. Minor remodelling	6. Total cost	PROJECT APPLICATION FOR REQUIPMENT, MATERIALS, AND MINOR REMODELLING UNDER NDEA III-A	M. I.D. Information	2. Total funds expended	*3. Application area (art, No Item No. civics, economics, English, geography, history, humanities, industrial arts, mathematics, modern foreign language, reading, science)

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PROGRAM NDEA IIIA
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Data Type	Conn Form 5 Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
LIST OF EQUIPMENT (OTHER THAN AUDIO-VISUAL)	NDEA. 85-864-	6-AF-2-6						
1. I.D. information	No Item No. No Item No.	No Item No.		Conn.Colo				
*2. Item (no. and amount) No Item No. specification, cost, total	No Item No.	No Item No.		Conn.Colo				
LIST OF EQUIPMENT - (AUDIO-VISUAL)	NDEA 85-864- IIIB	- 6-AF-2-6						
1. I.D. information	No Item No. No Item No.	No Item No.	сетк, тпа	CPIR, IIIA Conn. Colo			F/SS	F/SS can give total
2. Item (no. and amount), No Item No. specification, cost, total	, No Item No.	No Item No.	8-1	Conn. Colo.			Conn. Colo.	only
LIST OF MATERIALS (PRINTED)	NDEA 85-864- IIIC	6-AF-2-6	-					
1. I.D. information	No Item No. No Item	No Item No.	•	Conn. Colo.				
2. Item (no. and amount), No Item No. No Item specification, cost, total	No Item No.	No Item No.		Conn.Colo				
LIST OF MATERIALS (AUDIO-VISUAL)	NDEA 85-864- IIID	6-AF-2-6						
1. I.D. information	No Item No. No Item	No Item No.	-	Conn.Colo.				
 Item (no. and amount), No Item No. specification, cost, total 	No Item No.	No Item No.	-	Conn.Colo.				
	,							

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					6	* F. F. C. C. C. C.		
			Federal/			Direcent		
	Conn Corn Co	lo Item	State Variable	Identical	Source or Level	Time of Collaction	Category Breakout	Remarks
MINOR REMODELING	NDEA 85-864- IIIE	- 5-AF-2- 64-IV						•
1. I.D. information	No Item No.	No Item No.		Conn. Colo				
Item (no. and amount) specification, cost, total	Item (no. and amount) No Item No. specification, cost, total	No Item No.		Conn.Colo.				
C.O. 17E NDEA III	C.O.17E NDEA III	CDE 75 CDE 66		Conn.Colo.				
Project app. no., date of approval	No Item No. No Item No	No Item No.		Conn.Colo				
Area of expenditure (acquisition of equipment, minor remodeling, total) by actual expenditures by local school districts	No Item No. No Item No.	No Item No.		Conn.Colo.				
I.D. information	No Item No. No Item No.	No Item No.		Conn.Colo.				
LIST OF REIMBURSABLE PAYMENTS TO VENDORS	No Form No.	CDE 78		Conn.Colo.				·
*1. I.D. information	No Item No.	CDE 78		Conn. Colo.				
	No Item No.							
3. Date of check	No Item No.							
	No Item No.							
Total amount of reimbursable charges	No Item No.	No Item No.		Conn.Colo.				
				•				

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Data Type	Conn Corm & Co	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
LIST OF REIMBURSABLE PAYMENTS TO VENDORS (Cont.)	No Form No.	CDE 78						
6. Grand total	No Item . 0.	No Item . o. No Item No.		Conn.Colo				
*JR. AND SR. HIGH SCHOOL DIRECTORY	No Form No.		8SS-Pr, Q34				F/SS, Conn.	F/SS - T.V.
General information on school.								
DESCRIPTION OF MINOR REMODELING		5-AF-2- 64-IV			_			
1. Description of the type of remodeling		(Å)						
A. type of work		(1)					-	
B. by whom		(2)						
2. Description of the way in which remodeling will improve the instructional program		(B)						
APPLICATION FOR FUNDS TITLE III, PL 85-864		CDE 66	PIR, IVCI				F/SS, Colo.	
*1. Cost of (equipment, materials, remodeling by subject area	™	No Item No.						
				·				

				-				
			Federal/		1	Different		
Data Type	Conn Corm Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SPECIAL PROJECT FORM PRIORITY II		-5-AF-2- 64-II						
Nature of Project								
*1. (Project title, ob- jective, student no. and level, sub- ject areas, procedure expected outcome)	*	No Item No.CPIR, IVC2	CPIR, IVC2				F/SS	F/SS may or may not answer Colo. narra- tive on expected outcome
2. Personnel (director, other staff) by (college preparation, experience, other information)		No Item No.						
PROPOSAL RATING SHEET		No Form No.						
Percentage scale estimate of the degree to which:								
*1, Objectives ·learly stated and in measurable terms		(1)						
*2. Procedures are precise		(2)						
*3. Outcomes describe instructional im- provement		(3)						
*4. Teachers have been involved in planning		(4)						
*5. Matches the educa- tional priorities of		(5)			:			

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PROGRAM NDEA IIIA

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Data Type	Conn Corn Co. Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PROPOSAL RATING SHEET (Cont.)		No Form No.						
*6. There are possibili- ties for referral to other federal or state projects - list other projects		No Item No.	-					
QUESTIONS FOR LIMITED CONGRUENCE CHECK BETWEEN NDEA III AND CDE GOALS		No Form No.						
1. No. of years participated		(A1)						
*2. Subject matter emphasized		(A2)						
3. Subject matter benefitted most from NDEA III		(A2a)						
4. Subject matter needs help but cannot be funded		(A2b)						
5. Degree of over- matching by the no. of years		(A3)						
6. Source of help in appraising equipment needs (teachers, principals, salesmen/conventions, CDE, other)		(B1)						

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PROGRAM NDEA IIIA
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		Remarks												
		Category Breakout												
	Different	Time of Collection												
		Source or Level												
		Identical												
12) 17	Federal/	State Variable												
		Colo Form & Item	No Form No.	(B2)	No Item No.	(B4)	No Form No.	(A1)	(A2)	(A3)	(A3a)	(A3b)	(A3c)	
		Conn Form & Item												
-		Data Type	QUESTIONS FOR LIMITED CONGRUENCE CHECK BETWEEN NDEA III AND CDE GOALS. (Cont.)	7. Way in which needs are determined	*8. No. of contacts from CDE re NDEA III by type of contact (phone, etc.)	*9. Type of coordination with other programs	Questions for Teachers	10. Teaching assignment	11. Who decides on purchases	12. Emphasis of equipment use	13. Who uses equipment	14. Whether students use it and how	*15. Whether there has has been a change in emphasis in recent years	

PROGRAM NDEA IIIA

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	Remarks									
	Category Breakout									
Di ffonont	Time of Collection									
	Source or Level	-								
	Identical									
(22)	rederal/ State Variable					_			_	
	Colo Form & Item	No Form No.	(A4)	(A5)						
	Conn Corn Form &				-		•			
	Data Type	QUESTIONS FOR LIMITED CONGRUENCE CHECK BETWEEN NDEA III AND CDE GOALS (Cont.)	16. Whether district/ building has pro- vided training in the use of recently purchased equipment	17. Type of instructions (meetings, memos, first-of-year orientation)						

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VOCATIONAL EDUCATION PROGRAM

PROGRAM Vocational Education Services (Including Agriculture) $\mathbf{M}(1)$

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			Federal/		Ω	Different		
Data Type	Conn Form & Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
FINANCIAL STATEMENT OF FEDERAL FUNDS FOR VOCA- TIONAL EDUCATION BY STATE	OE 3129	OE 3129		Conn. Colo.				
*I. Program by financial statement of federal funds	Sect. I	Sect. I		Conn. Colo.				
*2. Fiscal year by adjust- ments to priof year expenditure reports	Sect. II	Sect. II		Conn.Colo				
3. Signatures of certi- No Item No. fication, date		No Item No.		Conn.Colo,				
EXPENDITURES FOR VOCA- TIONAL EDUCATION BY SOURCE, PURPOSE AND LEVEL BY STATE	OE 3131	OE 3131		Conn.Colo.				
*1. Program by type and level of expenditure	No Item No.	No. Item No.	Item No CPIR, IIIAConn. Colo	Conn.Colo.	_		F/SS	F/SS cannot supply all information
TOTAL EXPENDITURES BY OBJECT, PURPOSE AND LOCATION BY STATE	OE 3132	OE 3132		Conn. Colo				
*1. Type of post-secondary institution by expenditures	Sect. I	Sect. I		Conn. Colo,	_			
*2. Location by expenditures	Sect. II	Sect. II		Conn. Colo				
3. Legislative purposes by instructional costs, guidance and counselling, ancil-	Sect. III	Sect. III		Conn. Colo			F/SS	F/SS cannot supply all information

PROGRAM Vocational Educational Services (Including Vocational Agriculture)

			Federal/		1 1	Different		
Data Type	Conn Corn Form	colo Eltem	State Variable	Ide, tical c	Source or Level C	Time of Collection	Category Breakout	Remarks
PROJECT EXPENDITURES FOR SCHOOL CONSTRUCTION BY STATE	OE 3133	OE 3133		Conn. Colo.		_		
*1. Program by federal K expenditures by public law, state and local expenditures, no. of projects	No Item No.	No Item No.		Conn, Colo,			F/SS	
NUMBER OF TEACHERS, STATUS OF TRAINING, AND LOCAL ADMINISTRATIVE STAFF BY STATE	OE 3136	OE 3136		Conn. Colo				
*1, Vocational programs by number of teachers and status of train ing	Sect. I	Sect. I	CPIR, IIE	Conn.Colo.			F/SS	F/SS cannot supply all information
*2, Number of local administrative per- sonnel	Sect. II	Sect. II		Conn. Colo.	•			
ENROLLMENTS IN VOCATIONAL EDUCATION PROGRAMS BY STATE	OE 3138	OE 3138		Conn. Colo.				
Program by total, number, secondary, post-secondary, adult, cooperative	Sect. I	Sect. I	_	Conn.Colo,				
Program per enroll- ment subgroup by total, post-secondary, secondary, adult	Sect. II	Sect. II		Conn.Colo,				

PROGRAM Vocational Educational Services (Including Vocational Agriculture)

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Data Type	Conn Form & Item	n Colo Item Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Rem arks
ENROLLMENTS IN VOCATIONAL EDUCATION PROGRAMS(Cont.)	C OE 3138	OE 3138					•	
Enrollment subgroup per race by total, secondary, post-sec- ondary, adult	Sect. III	Sect. III		Conn.Colo.				
Enrollment subgroup per geographic loca- tion by total, secon- dary, post-secondary adult	Sect. IV	Sect. IV		Conn. Colo				
PLACEMENT OF PROGRAM COMPLETIONS BY STATE	OE 3139	OE 3139		Conn.Colo.				
Level for which this No Itam No. is a report (secondary, post-secondary, adult)	No Itam No.	No Item No.		Conn.Colo				
Program by status of No Item No. program completion placements		No Item No.		Conn.Colo,				
LONG RANGE PLAN		VE 115						Wa-l is specifically designed for vocational agriculture data and does not have 5-year projections.
Town, person, title, date	VF-1 VA-1, p.1							suota

PROGRAM Vocational Educational Services (Including Vocational Agriculture)

	Different	Time of Category	or Level Collection Breakout Remarks		Ag.& Conn.Colo. F/SS tot Voc. F/SS 9-12	Ed. Colo population in program Conn total vs. tar-get population	Conn.Colo. F/SS - total only F/SS Colo. minus no. of schools but adds no. of teachers, salaries	Conn.Colo. Colo. does not differ- (Conn. Ag. entiate areas on vs. forms nof tell the Conn.Voc.Ed no. of schools Conn. disadvantaged	and handicapped, also Colorado	Conn. Colo.	Conn. Ag.vs. Conn. Agriculture Conn.Voc.Ed form includes cost of purchasing site, etc.
(t) X			Identical or								
	Federal/		Variable		CPIR, IA		CPIR, IIIA 1-8 CPIR, ID 1-8				
		ഠ	Form & Item		VE 115 (8)	VE 115 (8)	VE 115 (2, 3,5,6,8,9,	VE 115 (2,3, 5,8,16) DF 3 (46,47)		VE 120 1.6	
		Conn	Form & Item Form		VP-2 (1-5) VA-1 (4)	VP-2 (1-5)	VP-3 (1-7) VA-1, p.3	VP-4 VA-1, p.4	VP-5 VA-1, p.5	VP-6 VA-1 (5)	VA-1 (8,9)
			Data Type	LONG RANGE PLAN (Cont.)	* 2. Population (No. of students) '71-72	Estimate '75-76	* 3. Summary of Vocational programs ('71-72) ('75-76)	*4. No. of various programs, by purpose, by school, by grade, by cost ('71-72) ('75-76)	5. Names of agencies and VP-5 representatives in- VA-1 volved	6. Advisory committee and members	7. Cost of facility

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program (program to program transfer

PROGRAM Vocational Educational Services (Including Vocational Agriculture)

MANAGEMENT

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			Federal/		Ω	Different		
Data Type	Coan Corm & Co	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
*ANNUAL CERTIFICATION								
* 1. Funds	VEA-8	VE 311				_	Conn. Colo.	
2. Signature	VEA-8 (2)	VE 311						estimate Conn three years
FISCAL PLAN OF OPERATION VEA 1-70	VEA 1-70 VA 6	VE12dVE100						VE 120 is in the nar- rative form for Colo.
								VA 6 is specifically for Regional Agri- culture Center
1. I.D. Data	VEA 1-70, p. 1 (1.1)(1 VA 6	(1.1)(1-4)		Conn. Co.o.				
2. Type of Program	VEA 1-70, p. 1 (1.2)(5-6) VA 6	(1.2),(5-6)		Conn.Colo.				
*3. Enrollment	VEA 1-70, p. 1 VA 6 (5) VA 12	(8)		Conn. Colo,				
*4. Estimate of expenses VEA 1-70, p.1 (4.4) (9) Teacher by salary reimbursement info.	VEA 1-70, p. 1 VA 6 (3)	(4.4) (9)		•			Conn. Colo.	Colo instruction costs vs. more specific Conn.
5. Name and Title	VEA 1-70, p. 1	VE 100, p. 1		Conn.Colo.			_	_
*6. Per pupil calculationVA ll	VA 11							
VOCATIONAL PERSONNEL SCHEDULE	VEA 2-70	VE12GVE 100					Coun. Colo.	
1. I.D., reimbursement	VEA 2-70	(4.3) (9)		,			Conn. Colo.	
2. Length of school periods	VEA 2-70 Form #3	(8)				<u> </u>	Conn. Colo.	

PROGRAM VOCATIONAL EDUCATION SERVICES (INCLUDING AGRICULTURE)

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			Fedenal/		Д	Different		
Data Type	Conn Col Form & Item Form &	Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
EQUIPMENT ALLOTMENT REOUEST .	VA-1A VA-2A VEA 3-70	VE ioi		Conn. Colo	•			VA-lA for vocational agriculture part of program. Includes equipment cost and reimbursement.
1. School, date, town	No Item No.	(1,2,3)		Conn. Colo.			•	
2. Item no., cost	No Item No.	(6-11)		Conn. Colo.				
3. Significance	No Item No.	Item No. No Item No.		Conn.Colo				
4. Total	No Item No.	No It÷m No. No Item No.		Conn.Colo				
OTHER EXPENSES	VEA 4-70	VE 120 (4.4)					Conn. Colo.	Colo not clear on expenses other than items
PROPOSAL MODIFICATION REQUEST	VEA 6-70	VE 120			Conn. Colo.		Conn.Colo.	Colo, states "Revised" Conn, uses "Modifica- tion" and is more clear and specific (includes enrollment
CONSUMER AND HOME EC PLAN OF OPERATION	VEA 7-71	DF-3			Conn. Colo.			Conn specific consumer and home ec. COUTSESpecific program information data
 Learning level (title and content) 		p.1(1,2,5, 6,7,8,9, 10,11,12, 25,51)					,	for instructional programs
*2. Teacher information	VEA 7A-71	DF-3 (48-49)			Conn. Colo.		Conn.Colo.	Colo, deals not with teacher by course but aggregate figures
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PROGRAM Vocational Educational Services (Including Agriculture)

-4M	DF 1 (1-4) VE 115 (3) DF 3 (41-47, 50) DF DF DF 5A DF 5A	
	DF 11-103-4M DF 5A DF 5B DF 6 DF 6	B DF 11-103- DF 5A DF 5B DF 6 11-103-

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PROGRAM Vocational Education Services (Including Vocational Agriculture)

matching the two forms Colorado (DF 6) more Codes may not match Colorado - need to level of program comprehensive per-Individual data in about graduation; program data in make assumptions Colorado requires listed to obtain sonal analysis Connecticut Remarks 0 Conn. Colo. | Source | Time of | Category | Identical | or Level | Collection | Breakout Different Conn. Conn. Colo. Conn, Colo. Colo. Colo. Colo. Conn. Conn. Conn. (8)**π** Conn. Col Variable Federal/ State DF 6(1,3,157) 11-103-4M(4) DF 6(17) 11-103-4M(5) DF 5A(2,6) DF 6 (6,7,2) DF 6(23,24, 2,15) Colo Form & Item DF 6(15,16) 11-103-4M(3) DF 6 11-103-4M DF 5A(9) DF 6 11-103-4M VE 115 DF 5A DF 5B Form & Item (A,B,M-0) Program by not avail (A, B, F-K) VR 21-68 (A,B,C) (A,B,E) 2. Secondary/post-secon VR 21-68 (A,B,R) (A, B, S) VR 21-68 Form #9 Conn *6. Program by employed Program by average hourly rate able for placement of No. unemployed by FOLLOW-UP GRADUATES relatedness to 3. Program by sex Program by no. Data Type graduates training program . 7× * ທ່ ς.

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PROGRAM Vocational Education Services (Including Agriculture)

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Data Type	Conn Corn Form &	lo Item	reueraı/ State Variable	Identical	Source or Level	E	Category Breakout	Rem arks
REIMBURSEMENT APPLICATION	N 17E-VEA-1	VE 100 VE 101		Conn.17E- VEA Colo.				-
1. I.D. Data	17E-VEA-1	VE 100 VE 101		Conn.17E- VEA Colo.				
*2. Salaries	17E-VEA-2 VA-9C	VE 100		Conn. 17E- VEA Colo.				
*3. Equipment	17E-VEA-3 VA-2A	VE 101		Conn. 17E- VEA Colo.	-			
*4. Other expenses	17E-VEA-4 VA-8 VA-9F VA-9B VA-9D VA-9E					,	Conn. Conn.	Conn. forms differ in category breakout
5 Travel	17E-VEA-5 VA-9A VA-6	VE 100			Conn.			
SALARIES FOR WORK STUDY	17E-VEA-2- W.S.	VE 100					Conn.Colo.	This will only work in (other) category on Colo. form equals or includes work study
ADULT EDUCATION INFORMATION		DF 4						No equivalent Conn. form
INDIVIDUAL STUDENT INFFORMATION *1. Previous employment		VE 150 DF-5A DF-5B						No available Conn. form
status								

PROGRAM Vocational Education Services (Including Agriculture)

		Remarks	Colorado has a thorough form for surveying ployers - None available for Connecticut	No comparable Conn.	No comparable Conn. form	No Conn. form	No Conn. form avail- able	No Conn. form avail- able	Colorado offers speci- tic evaluation sheet for Business and Office Education programs.
		Category Breakout							
	Different	Time of . Collection							
3		Source or Level							
(10)		Identical							
	Federal/	State Variable							
·	-	Colo State Form & Item Variable	11-112-2M	VE 18	VE 104	DF 7A-7B	5-108-200-	D-5	No Form No.
		Conn Form & Item							
		Data Type	*EMPLOYER QUESTIONNAIRE (Includes local employ-ment information - available jobs, kinds of backgrounds necessary, dutic., union information full-time and part-time)	GRADUATE STUDENT REPORT (Thesis, financial information)	APPLICATION TO TEACH VOCATIONAL EDUCATION	PLANVING DATA (Handicapped, depressed areas, unemployed, low wage)	SCHOOL VISITATION CHECK (Chec): list for T and I Programs)	DISTRIBUTIVE EDUCATION EVALUATION (School self-evaluation)	BUSINESS AND OFFICE EDUCATION EVALUATION (Summary Report for Business Education by School)

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PROGRAM Vocational Education Services (Including Agriculture)

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Conn Corn Corn & Co.
No. 1-10
FFA Form
No Form No.
Existing and anticipated staff vacancies by program

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PROGRAM Vocational Education Services (Including Agriculture)

	_		Federal/			Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
FORMAT FOR VEA PROGRAM PROPOSAL	No Form No.	VE 120 VE 122 VE 123						
l. Title of program	Ą	VE 120 1.2		Conn Colo				
2. Program objectives	B	VE 120 1.4		Conn Colo				
3. Program procedures	υ				· - · · · ·			
4. Population groups to be served	Ω							
Manpower needs and Job opportunities	មា	VE 120 1.5			-		Conn Colo	
%. Equipment	ſτι		CPIR III				Conn Colo	
*7. Other expenses	ິນ	120 4:3	0				Conn Colo	
8. Staff qualifications	#	4.4						
9. Administrative	н	VE 120 1.7					Conn Colo	
 Coordination with other programs 	ט	VE 120 1.9			<u>-</u>		Conn Colo	
ll. Fiscal plan of or- eration	×	4 1-4.4 VE 101					Conn Colo	
Local Pla for Vocational Education Certification		VE-115A		_				
*1. Name of school, dis- trict no., city, count;, local ad-		No. Item No.		_				
person preparing plan and signatures, date								
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PROGRAM Vocational Education Services (Including Agriculture)

		Remarks		٠												
-		Category Breakout														
	Different	Time of Collection														
	Д	Source or Level														
		Identical c	Conn Colo												_	
<u> </u>	Federal/	- 0)														
		Colo Form & Item	OE 3140	VE 120	(1.8)	(11.11)	(2.1)	(2.2)	(2.3)	(3.1)	(3.2)	(3.3)	(3.4)	(3:5)		
		Conn Colo	OE 3140							m					,	
		Data Tone	TT OF SS FOR FION BY on of ent and od for	PROPOSAL FOR OCCUPATIONAL EDUCATION INSTRUCTIONAL PROGRAM	1. Describe all instructional facilities to be utilized	2. Anticipated date	3. Individual courses	4. Course description	5. Time requirements	6. Requirements for admission for students	7. Guidance and counsel- ing services	8. Placement services	9. Follow-up	10. Student organization		

PROGRAM Vocational Education Services (Including Agriculture)

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Data Type	Conn Form & Item Form & I	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
COOPERATIVE PROGRAMS AND PROJECTS		VE 122						VE 122 is the guide- line for proposals
				-				for Exemplary Program and Projects in Colo.
1. Purpose of program		(1.9)						
2. General and specific objectives		(1.10)						
3. Duration		(1111)						
4. Priority of funding refinements		VE 123 (1.12)						
5. Information on how program provides continued employment without displacement	. 70							
6 Nature of course		(2.5)						
7. Portion of cost borne by applicant		(4.5)						
8. Procedure to assure separation of federal and local funds		(4.6)						
9. Opportunity for students from nou- profit schools in proposed program and number of students		(6.1)						
10. How classes formed and scheduled for these students		(6.2)						
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PROGRAM Vocational Education Services (Including Agriculture)

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		Remarks								-	
		Category Breakout							 <u> </u>		
	Different	Time of Collection									
	ı	Source or Level									
K (15)		Identical							 	·	
	Federal/	41	-						 		-
			VE 122 VE 123	(6.3)	(6.4)	. (6.5)	(6.6)	VE 123 (7.1)	 •	 	
		Conn Corn Eorm & Item							 	 	
		Data Type	GUIDELINE FOR SPECIAL COOPERATIVE PROGRAMS AND PROJECTS	11. Public school personnel used in facilities other than	public school 12. Use of teachers from non-profit private schools	13. Mobile or portable equipment use	14. Supervision and evaluation arrangements for programs serving private school students	15. Added cost			

DRUG EDUCATION PROGRAM

Proportion of

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PROGRAM Drug Education

Programme S

- Personal

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(Alternative)

Sufficient or a

Predictions | Landing | (dissipated)

			Fodomal /			Different		
Data Type	Cc.in Form & Item	Item Form & Item	State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks
								The CDE does not manage the federal (Drug Abuse Act) or state (HB 1136) funds.Thus
						_		there are no applica- tion forms as in Corn The CDE does, how-
-			٠					ever, monitor the progress of Drug
								naires and interviews to assess student knowledge and atti- tudes.
LETTER OF INTENT - EPP.N GRANT FOR DRUG EDUCATION	No Form No.					3.31		
*I. Amount requested for: matching tuition funds per person, consultant/specialist services needed, total	for No Item No.							
2. Other cooperating districts	Mo Item No.							
EPDA - PROJECT APPLICATION NO Form No. FOR URUG EDUCATION	No Form No.							
i. Description of local Drug Education reacher training plan	(5)							
2. Position of team leaders	(3a)							

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PROGRAM Drug Education N (2)

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	Remarks			•							
	Category Breakout		·				Conn. Colo.	Conn. Colo.			
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	Colo Form & Item						CDE 114.	CDE 114			
	Conn Conn Form 6	do Form No.	(39)	(3c)		(34-1)	(34-2)	(34-3)	(4)	C.O.17E DETP	No Item Mo.
	Data Type	EPDA - PROJECT APPLICATION No Form No. FOR DRUG EDUCATION (Cont.)	ት3. Workshop/course to be attended	"4. Description of follow- up plans for work- shops at the local levels for teachers who will have direct responsibility for	drug education, teachers and related staff who need to have ricurate under- standing about drug abuse.	*5. Total tuition cost per person	%6. Source and amount of local matching funds	7. Amount requested from State service	*8. Information on funds for part-time con- sultant/specialists	HWV LICE FOR REIMBURSEMENT	*1. Total reimbursement request for Drug Edu- cation Training Prog- ram

PROGRAM Drug Education

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Data Type	Form & Item Form &		Item!Variable	dentical	or Level	Collection	preakout	hellarks
INVOICE FOR REIMBURSEMENT (Cont.)	C.O. 17E DETP							
2. Inclusive dates of program	No Item No.							
EVALUATION DATA FOR DRUG EDUCATION TEACHER IN-SERVICE GRANT	No Fcrm No.		CPIR, IIE				F/SS	
*1. Number of students, staff (teachers, ad- ministrators, school nurses, guidance counselors, others) trained ander grant to 4/1/71	No Item No.							
*2. Number of students, staff (as above) to be trained under grant from 4/1/71 through summer '71	No Item No.							
DRUG EDUCATION PROGRAM COMPONENTS		CDE 114						
*1. Program components (audio-visual mate- rials, printed mate- rials, former drug users, medical per-		No Item No.						
nel, other speakers, teacher presentations class discussions, travel, local	of .					_		





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PROGRAM Drug Education N (4)

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Conn Corn Form 6	Lo Item	State Variable	Identical	Sour ce or Level	Time of Collection	Cat egory Breakout	Remarks
CDE	Е 114						
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No.	No Item No.						
N N	No Item No.						
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% 	No Form No.				-		
	(1)			,			
	(2)			_			
	(3)			- <u>-</u>			

PROGRAM Drug Education

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Data Type	Conn Corn Co Form & Item Form &	Colo Form & Item		Identical	Source or Level	Time of Collection	Category Breakout	Remarks
DRUG QUESTIONNAIRE FORM A (Cont.)	_	No Form No.		,				
* (The rest of this form measures student knowledge and atti- tude in the area of drug abuse)								
INTERVIEW SCHEDULE GRADES 3, 6, 9		No Form No.						
1. Sex		(1)						
2. Age		(2)	-					
3. Grade level		(3)			_			
* (The rest of this form measures student knowledge and attitude in the area of drug abuse)								
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Data Type	Conn Form & Item	Colo Form & Item	rederal/ State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks	
FALL, ELEMENTARY AND SECONDARY SCHOOL SURVEY BY DISTRICT	0S/CR 101	0S/CR 101		Conn.Colo					
1. I.D. Data	(1-111)	(111-1)		Conn.Colo.		_			
2. Chief administrative officer of school system	(IV)	(IV)	·	Conn.Colo,					
3. No. of individual school campus report forms	(y)	(A)		Conn.Colo					
4. Student enrollment in this system	(VI)	(VI)		Conn.Colo					
* A. Total student enrollment by American Indian, Negro, Oriental, Spanish surnamed, all individuals not included and totals	(VIA)	(VIA)	ESS-Te, Q4a-e CPIR, IA	Conn. Colo, F/SS, Corn Colo. (PCI-Te)	F/SS,Com. Colo. (PCI-Te)		F/SS, Conn. Colo.	F/SS - total by ethnic	nic
* B. Non-resident students by ethnic category and fotals	(VIB)	(VIB)		Conn.Colo,					
<pre>% C. Resident students by ethnic category and totals</pre>	(VIC)	(VIC)		Conn.Colo.	-				
5. Resident student not enrolled in this school system	(VII)	(VII)		Conn.Colo.					
"A. Resident students enrolled in another public school system hy ethnic category	(VIIA)	(VIIA)		Conn.Colo					

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PROGRAM Bilingual Education 0(2)

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Data Type	Conn Conn Form &	Colo Form & Item	State Variable	Identical c	Source or Level	Time of Collection	Category Breakout	Remarks	
FALL ELEMENTARY AND SECONDARY SCHOOL SURVEY BY DISTRICT (Cont.)	0S/CR 101	0S/CR 101		Conn.Colo					T
* B. Resident students enrolled in non- public schools by ethnic category	(VIIB)	(VIIB)		Conn. Colo					
* C. Resident school-age population not in school by racial and ethnic category	(VIIC)	(VIIC)		Conn.Colo		,			
6. Full-time profession- al staff assigned to one school and assigned to more than one by ethnic cate- gory and totals		(VIIIA,B,C) (VIIIA,B,C)		Conn. Colo.	,	,			
7. Total full-time class- room teachers assigned to one school campus by ethnic category	(VIIID)	(VIIID)		Sonn. Colo.				·	
8. Part-time professional staff by ethnic cate-gory	(X)	(X)		Conn. Colo.					·
9. Certification	No Item No.	No Item No.	_ .	Conn. Colc.					
FALL ELEMENTARY AND SECONDARY SCHOOL SURVEY INDIVIDUAL SCHOOL CAMPUS	0S/CR 102	0S/CR 102		Conn.Colo.					
l. I.D. Data	(I-IV)	(I-IV)		Conn. Colo.		<u></u>			
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PROGRAM Bilingual Education ()(3)

	Remarks			F/SS - total by ethnic		F/SS - teachers only				F/SS - sex, marital status	
	Category Breakout			F/SS,Conn. Colo.			_ ·			F/SS, Conn.	
Different	Time of Collection										
	Source or Level		•	.F/SS, Con Colo. (PCI-Te)		F/SS, Corr Colo.					
	Identical	Conn.Colo.	Conn.Colo	Conn.Colo, F/SS, Com Colo. (PCI-Te)	Conn.Colo	ESS - Te,Q21 Conn. Colo	Conn.Colo	Conn.Colo.			
7040001	- 0			ESS-Te, Q4a-e ESS.Pr,Q7		ESS - Te,Q21				ESS -TeQ21 ESS - Te,Q23	
	Colo Form & Item	0S/CR 102	(A)	(VI)	(111)	(VIII)	(IX)	No Item No.			
	Conn Conn Form &	0S/CR 102	(v)	(VI)	(vii)	(VIII)	(XI)	No Item No.	Application Teacher Exchange	p. 1	
	Data Type	FALL ELEMENTARY AND SECONDARY SCHOOL SURVEY: INDIVIDUAL SCHOOL CAMPUS REPORT	2. Grades	3. No. of enrolled students by American Indian, Negro, Oriental, Spanish surnamed, all others, and total	4. Part-time professional staff by ethnic category	5. Full-time professional staff; teachers, other, principal, assistant principals and total by ethnic category	6. Building construction to accommodate more students in last year	7. Certification	APPLICATION FOR POSITION UNDER THE TEACHER EXCHANGE PROGRAM	l. I.D. Data	·

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PROGRAM <u>Bilingual Education</u> 0 (4)

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Data Type	Form & Item Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
APPLICATION FOR POSITION UNDER THE TEACHER EX-CHANGE PROGRAM (Cont.)	. Teacher Exchange				· .			
2. Academic and professional preparation	p. 1		ESS - Te, Q47, 50				F/SS, Conn.	
3. Fluency in Spanish	p. 2		•					
4. Name, address and diploma from college or university	p. 2 No Item No.							
5. Teaching experience	p. 2 No Item No.							
6. Training in linguis- tics or English as a second language	p. 2 No Item No.	,						
7. Willingness to use techniques for teaching English as a second language	p. 2 No Item No.					,		
8. Studied outside U.S.	p. 2 No Item No.				-			
9. Rural community experience	p. 2 No Item No.	_						
10. Extra-curricular activities	p. 2 No Item No.							
<pre>11. Special interests and hobbies</pre>	p. 2 No Item No.							
12. Civic interests	p. 3 No Item No.				_			

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	Remarks										Conn. much more specific by grades than comparable Civil Rights form. F/SS total by ethnic and total by grade	
·	Category Breakout										Conn.Colo. F/SS	
Different	Time of Collection											
	Source or Level									•	F/SS, Conn Colo.	
	Identical											
 Federal/	-										ESS.Te, Q4a.e CPIR, IA	
	Colo Form & Item								0S/CR 102	No Item No.	(VIA)	
	Conn Con Form & Item Form &	Appl. for Teacher Exchange	p. 3 No Item No.	n p. 3 No Item No.	p. 3 No Item No.	p. 3 No Item No.	p. 3 No Item No.	p. 3 No Item No.	ЕD 053В	No Item No. No Item No	No Item No.	No Item No.
	Data Type	APPLICATION FOR POSITION UNDER THE TEACHER EXCHANGE PROGRAM (Cont.)	13. Travel (inside and outside U.S.)	14. Willingness to teach and live where assigned	15. Will spouse come and can you and spouse h adapt	16. Willingness to cooperate	17. Why applying	18. Certification	RACIAL SURVEY - INDIVIDUAL SCHOOL SHEET	1. I.D. Data	2. No. of pupils by specific grade level, ungraded, Special Education and total by American Indian, Negro, Oriental, Spanish surnamed, all others and total	3. Percent in school

PROGRAM Bilingual Education 0(6)

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Data Type	Con Con Co	Colo, Form & Ites	State Variable	Identical	Source or Level	Time of	Category Breakout	Remarks
RACIAL SURVEY - TEACHER SURVEY SHEET FOR SELF- CONTAINED CLASSROOMS	ED 053C							
1. I.D. Data	No Item No.	•						
2. Individual class enrollment by grades and ethnic category	No Item No.		ESS-Te, Q4a-e ESS-Te, Q3	F/SS, Conn.			·	
RACIAL SURVEY - TEACHER SURVEY SHEET FOR EN:1.ISH TEACHERS	ED 053D						_	
1. I.D. Data	No Item No.							•
2. Individual class enrollments by class section number, grade and ethnic category	No Item No.		ESS_Te, Q4a-e°				F/SS, Conn.	
N FOREIGN ESOL IN ARY SCHOOLS	Enrollment Form					,		
1. I.D. Data	No Item No.					_		
*2. Seventh and eighth grade enrollment by specific foreign language course	No Item No.				<u> </u>			
(including English to speakers of other languages)								
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		Conn	Enrollment Form	on ma	oN ma						
.		Conn Form & Item	Enro	Ö H F	No Item No.						
			GN N OOLS	Enrollment for grades No Item No. 9-12 in specific foreign language course by level of course		·	_	_			
		a)	FOREIC SOL II Y SCHO	Enrollment for graph 9-12 in specific foreign language course by level course	Is there a program of English for speakers of other languages						
		Data Type	IN I	Enrollment for g 9-12 in specific foreign language course by level course	ish ish is of						
		Data	MENTS GES A SECC	Enroll ⁿ 9-12 fr foreigr course course	Is there of English speakers of languages				•		
			ENROLLMENTS IN FOREIGN LANGUAGES AND ESOL IN PUBLIC SECONDARY SCHOOLS (Cont.)	*3. En 60 60 60	4. Is of sp						
	1			*						 	

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	Category Breakout					÷				
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	Colo Form & Item	0 5. 7219	(7)		(10)	(9)		(10)		
	Conn Corn Cor	·	(2)	(3)	(4)	(5)	(9)	(7)	(8)	
	Data Type	EPDA - B2 - GRANT APPLICATION	l. Project Title	2. Whether project will be administered through a single agency or multiagencycooperatively	3. Amount of EPDA B2 funds requested for use in 1971-72 period	4. Is this request a renewal of an EPDA grant for the period July 1 - June 30, 1970-71 school year	5. Length of time project is to run (time in- tend to request funding)	6. Will this project include local funds or other Federal funds	7. How much other Federal funds and what is the source	

PROGRAM Education Professions Development Act P(2)

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	Remarks							·	·
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	Source or Level		Conn.					Conn.	
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	Conn Colo		(50)				(5)	(18)-(21)	
	Conn Form & Item		(6)		٨		(11)	(12)	(13)
,	Data Type	EPDA - B2 - GRANT APPLICATION (Cont.)	8. Characteristic of impact area of project: large city, suburb of large city.	rural area near large city, small city/ medium sized city, suburb of small city/	medium sized city, rural area near small city/medium sized city	9. Whether any of the following took part in planning this project: central office, college, advisory committee, community leaders, teachers, parents, students, consultants other specify	10. What is the position of person in charge of project?	<pre>11. What target group or</pre>	12. What is the local need for this project in terms of either quantity or quality or both?

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	Remarks	School Improvement	Leadership Development Program										_						
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	Colo Form & Item	(9) and	SILPD (1)											(16)					
	Conn Conn Form &	(14)		_										(15)	(16)			No Form No.	
	Data Type	EPDA - B2 - GRANT APPLICATION (Cont.)		ity available to people in the area,	basic subjects more	assistance, give more assistance to early	childhood educational	ial education needs	of all types, provide more assistance to	Voc. Tech. personnel needs. give school	administrators more	better utilization of	a school personnel, other.	14. Number of teachers, number of teacher aids	15. How will project be evaluated, both in	process and after completion. What	follow up on participants is planned?	EPDA - B2 - BUDGET AND FINANCIAL PLAN	A. Direct Cost - Admin-istrative and Instructional Staff

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PROGRAM Education Professions Development Act

Remarks Form & Item Form & Item Variable Identical or Level Collection Breakout Time of · Category Different Source Conn. CPIR, II E (1-4) Federal/ State Colo SILDP (VI) (A 1-8) Conn A. Direct Cost - Adminis-trative and Instrucstructors, part-time instructors, instruc EPDA B2 PROJECT - CURRENT lecturers and/or con INTERIM REPORT ON BUDGET staff, full-time inject director, secretarial and cleri-1. Amount budgeted for the following: procal, other adminis-AND FINANCE FOR CURRENT 2. Amount budgeted for travel, office supsultants, subtotal. trative supporting EPDA - B2 - BUDGET AND FINANCIAL PLAN (Cont.) the following: emtional assistance, rental, fees, subinstructional sup-B. Other Direct Costs plies, publicity, plies, equipment ployee services, total, total. Data Type tional Staff

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Data Type	Conn Corn Co.	Colo Form & Item	- 0)	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
INSTITUTIONAL INFORMA- TION SUMMARY FOR USE IN APPROVAL OF TEACHER PREPARATION PROGRAMS	No Form No.							
1. Home and address of institution	No Item No.							
2. Home and title of the No Item No. head of the institution	No Item No.							
3. Home and title of the highest ranking teacher preparation official	No Item No.	_						
4. Home and title of the person responsible for recommending graduates to the CSDE for certification	No Item No.							
5. Date of last program approval	No Item No.							
6. Kind of institution: quarter, semester, etc college for men, women, coed, private, state, other	(1A)		,					
7. Length of summer session and maximum graduate and undergraduate credit	(18)			-				
8. Highest degree granted	(10)							

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	Colo Form & Item						
	Conn Form & Item		(1D)	(1E)	(5)	(3)	
	Data Type	INSTITUTIONAL INFORMA- TION SUMMARY FOR USE IN APPROVAL OF TEACHER PREPARATION PROGRAMS	Total enrollment by undergraduate, graduate, full time, part time	Whether a period of full-time residence required for: M.A., Sixth Year Program, Doctorate, and how long.	Endorsement designation (grade level and subject area) by approval requested (initial, reapproval), Degree level (Bachelors, Masters, Sixth Year, Doctorat), No. of completions last 3 years)	12. Criteria for admission: high school rank, recommendations physical examination, standardized examination, ations, other.	

PROGRAM Education Professions Development Act P(8)

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		Colo Form & Item										
		Conn Corn Form		No Item No	No Form No.	No Item No.	(1)	(2)	(3)	(4)	(5)	(9)
		Data Type	INSTITUTIONAL INFORMATION SUMMARY FOR USE IN APPROVAL OF TEACHER PREPARATION PROCRAMS	28. Signatures of chairman of Education, President, Date	PROJECT READERS EVALU- ATION CHECK LIST EPDA B2	1. Project no., leader no., title of project	2. Project will improve quality of institution	3. Project will meet critical shortage in institution	4. Project will meet local need	5. Project warrants finding for more than one year	6. Project will bring new kinds of people into public school service	7. Project will contribute to better utilization of school personnel in the system or area

PROGRAM <u>Education Professions Development Act</u> P(12)

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	Conn	Colo	State		Source	Time of	Category	•
Data Type	Form & Item Form &		Variable	Identical	7	Collection	Breakout	Remarks
PROJECT READERS EVALUA- TION CHECK LIST EPDA B2								
Project will encourage better teacher preparation techniques in preparing institutions	(7)				,			
Project will encourage greater understanding among persons	e (8)							
Project is aimed at urban areas of minor- ity groups	(6)					-		
Ideas in proposal contribute to variety in approaches to problems	(10)						-	
Ideas are imaginative	(41)					_		
There is demonstrated local committment to project	. (12)							
Cost per pupil seems reasonable	(13)							
Participants will re- ceive pre-service and in-service training	(14)						-	
Evaluation plan is good	(15)		*					
					-			

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		Remarks	·									Rating of items on five point scale	
		Category Breakout											
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	,	Conn orm & Item		(16)	(11)	(18)	(19)	(20)	No Item No.	No Form No.	No Item No.	(1a).	(19)
		Data Type	PROJECT READERS EVALUA- TION CHECK LIST EPDA B2	17. Evaluation plan has a provision for follow up on participants for possible contribution to future projects	18. Effort to involve community and others in education in planning	19. Participants will be carefully selected	20. Supervision and direction is adequate	21. Plans exist for writing up this project and differentiating	22. General comments	EVALUATION EPDA, B-2 PROJECT	1. School district, pro- ject title, evaluator: visitation date	2. Direction of project consistant with ob-jectives	 Teachers, adminis., pupils are aware of objectives

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PROGRAM Education Professions Development Act P (14)

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Data Type	Conn Form & Item	Item Form & ltem	Variable	Identical	7	Collection	Breakout	Remarks
EVALUATION EPDA, B-2 PROJECT (Cont.)					-			
Adequacy , f budget	(4a)			_				
Administration is good in: leadership, supervision, fiscal management	(49)				-		•	•
Provisions are being made for integration of successful project activities into the regular school program	(5a)							
The Board of Ed. and administrative staff are committed to support of objectives after federal funding ends	(5b)						•	
Evaluation practices and measuring instruments are appropriate for measuring the achievement of objectives	(6a)							
Provisions for follow up activities are appropriate	(7a)		•					
								·

PROGRAM Education Professions Development Act

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Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
EVALUATION EPDA, B-2 PROJECT (Cont.)								
18. Strong points of project	(Sec. II 1.)							(18)-(21) is narrative
19. Weakness of project	(Sec. II 2.)							·
20. Suggestions for improvement	(Sec. II 3.)							
21. Additional Comments	(Sec. II 4.)							
PROJECT SUMMARY FOR FY70 No Form No.	No Form No.							
1. Project No.	No Item No.							
2. Project title	No Item No.	-						
3. Project dates inclusive	No Item No.					_		
4. Total grant award	No Item No.					_		
5. Total funds spent	No Item No.		CPIR II					
6. Total funds committed No	No Item No.		E 1-4)		•			
7. Balance of funds un- encumbered	No Item No.					_		
8. Total "carry over" funds	No Item No.							
9. Signature, date	No Item No.				_		_	
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APPLICATION FOR CERTIFICATION	TCS Form26							
1. Home, social security no., D.O.B. and iddress of applicant	security No Item No.							
2. Type of certificate requested	No Item No.							
3. Signature, date on affidavit of citizenship	No Item No.							
4. Education: InstitutionNo Item No- field, month and year, of graduation, degree, inclusive dates of attendance	nNo Item No.		ESS- TE Q46,49 ESS- TE Q47,50					
5. Experience in teachingNo Item No. town, state, school, position, inclusive dates	gNo Item No.					<u> </u>		
6. Other experience: employer, position, inclusive dates	No Item No.							•
7. Home and location of preparing college	No Item No.							
8. Home and address of applicant	No Item No.						·	
9. Type of position	No Item No.							
10. Effective date of com-No Item No. pletion of requirements.	No Item No.							

PROGRAM Education Professions Development Act P(18)

	 -											
		Remarks								,		
		Category Breakout								F/SS	F/SS	
	Different	Time of Collection			*					F/SS	F/SS	
,		Source or Level	•									
7 (10)		Identical										
	Feder: 1/									CPIR, II (E 1-4)	CPIR, II (E 1-4)	
		Colo Form & Item			O.E. 7219	(2)	<u> </u>	(4)	(8)	(11)	(14)	(15)
		Conn Corn Co Form & Item Form &		No Item No.								
		Data Type	APPLICATION FOR CERTIFICATION (Cont.)	11 Signature, home and title, date	PROPOSAL COVER SHEET EPDA, Parts D and F	1. Type of institution (4 year college, jr. college, SEA, LEA)	2. If college, type of (public, non-public, land grant, not land grant, black, not black)	3. Name, position, address of person submitting proposal	4. Whether linkage with a model cities group is proposed	5. Total no. to be trained	6. No. of FTF weeks for (5) FT or PT, summer or academic year, inclusive dates of training	7. No. of participants by (already in Ed., returning to Ed., never in Ed.)

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PROGRAM Education Professions Development Act P (19)

	Remarks													
	Category Breakout								_					
Different	Time of Collection	,									_			
J	Source or Level				_									
	Identical										_			
Federal/	State Variable													
	Colo Form & Item		(11)	No Item No.	No Form No.	(11)	(111)	(II)	(A)	(IA)	(VII)	(VIII)	(IX)	(x)
	Conn Form & Item				٠									
	Data Type	PROPOSAL COVER SHEET EPDA, Parts D and F (Cont.)	8. Recruitment of par- ticipants will be (national, regional, local)	9. Brief description of project	SCHOOL IMPROVEMENT LEADERSHIP DEVELOPMENT PROGRAM	l. Government, Element	2. Title	3. Brief description	4. Responsible Unit	5. Resource to be pro- vided by EPDA	6. Date available for field testing	7. Date available for presentation to LEAD	8. Planning and Develop- ment time by the unit	9. Time required for presentation in the field

GENERAL STATISTICS

General Statistics Q(1)

			,		•		-	
			Federal/		a	Difterent		
Data Type	Conn Corn Form 8	lo Item	- 01	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
FALL REPORT FROM SCHOOL DISTRICTS		CDE Form 4 Part I						
Part I District Summary Colorado CDE Form 4								
l. County, legal district no., date school began, date will end, no. of days school officially scheduled.		SEC A (1-5)	ESS-Di, Q2a				F/SS Colo.	
2. Required entrance age as of month and day by prekindergarten, ten, kindergarten, first grade		SEC A (6)						
3. No.of days officially scheduled and length of daily session by prekindegarten, kindegarten	>	SEC A (7-8)						
4. Yearly tuition rate per non-resident by kindegarten, elementary, junior high, senior high		SEC A (9)						
5. Provided without charge to students, yes or no; textbooks, workbooks. Nos. 5-9 all classified by elementary, junior high, senior high		SEC A (10)	ESS-Di, Q40				F/SS, Colo.	

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General Statistics Q(2)

	Remarks			•			Conn. Colo. are different by time of collection as of their due dates, though not by much, but are essentially from the same time period of the school year.	
	Category Breakout		F/SS, Colo.	F/SS, Coio.			F/SS, Colo.	
7,550	Time of					,	·	
	Source or Level							
	 Identical						Conn. Colo.	
	Federal/ State Variable		ESS -Di, Q40	ESS -Di, Q40			CPIR, IA	
	Colo Form & Item		SEC A (10)	SEC A (10)	SEC A (10)	SEC A (10)	SEC B, II	
	Conn Corn Co						Opening School En- rollment ED 036 (4)	
	Data Type	PART I DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)	6. Purchase from private bookstore, yes or no: textbooks, workbooks	7. Textbook fee: yes or no, amount of fee, amount returnable	8. Pay district for workbooks: yes or no, amount	9. Students pay fees other than for textbooks and workbooks:	*10. School name, code, no. of children in school, district total by grades Pre- K., K., 1, 2, 3, 4, 5, 6, 7 elem, 8 elem elem, special ed., ungraded elem., elem membership	

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General Statistics Q(3)

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		Remarks								·
		Category Breakout		F/SS, Conn.	F/SS, Colo.	Conn. Colo.				
	Different	Time of Collection								
		Source or Level							4	
9(3)		Identical		Conn. Colo			· · · · · · · · · · · · · · · · · · ·			
3 *	Federal/			CPIR, IA	CPIR, IA					
		Colo Form & Item		SEC B (12)	SEC B (12)	SEC B (12)	SEC C (13)	SEC D (14)		
		Conn Corm & Co		ED 036 (4)		ED 036 (3)				
		Data Type	PART I DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)	*11. School name, code, district total, no. of children in school by grades by 7 sec., 8 sec., 9, 10, 11, 12, sec. spec. ed., ungraded sec., past graduate sec. membership	*12. Total membership	13. Pupils attending less than full day, other than pre K and K by elementary and sec dary	14. No. of pupils in ungraded programs by ages 4 and under. 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18 and over	15. No. of instruction rooms abandoned or converted to other uses		

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General Statistics Q (4)

			,					
			Federal/		ρ	Different		
Data Type	Conn Corn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PART I DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)								
16. No. of newly con- structed instruc- tion rooms		SEC D (15)						
17. No. of instruction rooms added and occupied by newly constructed, converted	_	SEC D (16,a,b)						,
18. No. of instruction rooms in use		SEC D (17)	_					
19. No. of usable instruction rooms not being used		SEC D (18)						
20. Total no. of mobile or other temporary instruction rooms in use		SEC D (19)		_				
21. Number of buildings constructed: elementary, secondary, other combination of levels by before 1900, 1900-1920,1921-1940, 1941-1960, 1961 present.	1 년	SEC D (20)						
22. No. of buildings used as: elementary, junior high, h; zh school, two or more levels, other types	or	SEC D (21)						

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General Statistics Q(5)

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Data Type	Conn Corn Co	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PART I DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)								
23. Plans to remodel, replace or construct new instruction rooms	Ø	SEC D (22)				,		
24. Contemplate any building construction		SEC D (23)						•
25. Band election contemplated, year, how much		SEC D (24)		•				
26. No. of additional rooms and facilities needed by reason of absolescence, or expansion, by type		SEC D (25)						
27. Travel and trans- portation allow- ances, and provision of car		SEC D (26)						
28. Superintendants - other compensation		SEC D (27)		_	_			
29. Attached salary schedule		SEC D (28)						
30. No. of service personnel other than certificated: positions by number fulltime, part time, salary information, remarks		SEC E (29)		<u>.</u>				-

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General Statistics Q (6)

	Remarks								
	Category Breakout Re					F/SS, Colo.			
Differen:	Time of Collection								
I	Source or Level								
	Identical								
Federal/						CPIR, IA			
	Colo Form & Item		SEC E (30)	SEC F (31)		SEC F (32a)	SEC F (32b)	SEC F (32c)	SEC F (32d)
	Conn Conn Form &								
	Data Type	PART I DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)	31. Additional pay: Subject or activity by no. of teachers, yearly extr. pay. Months engaged in activity	32. Summer school pro- gram	33. The following by PreK, K, elementary, junior high, senior high total.	a. No. of pupils enrolled in: remedial courses accelerated courses, regular	b. tuition charged per pupil per class: to district	district pupils cout of district pupils c. fees charged per pupil per class. textbook fees, all other fees	34. Transportation for summer school pupils at district expense

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General Statistics Q (7)

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			Federal/		Q	Different		
Data Type	Conn Form & Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
PART I DISTRICT & UMMARY Colorado CDE Form 4 (Cont.)								
35. Transportation for summer school sponsored activities at district expense		SEC F (32e)						
36. Total operating expenses for summer		SEC F (33a)						
37. Revenue from tuition and fees		SEC F (33b)						
36. Revenue from other sources		SEC F (33c)						
39. Net cost to school district		SEC F (334)						
40. No. of sessions planned for inservice education		SEC G (34)						
41. No. of days pre- se. ماند workshop		SEC G (34)					-	
42. No. of days past session workshop		SEC G (34)					-	
43. Funds expended unservice program		SEC G (34)	CPIR, II (E 1-4)				F/SS, Colo.	
44. Year of last self evaluation: district wide K-12, Title I ESEA only, elementary only, junior high		9 3as						

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General Statistics Q (8)

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			Federal/			יווופוביור		
Data Type	Conn Form & Item	nn Colc Item Form & Item	State Variable	Identical	Source or Level	Time of Collection	Categorv Breakcut	Remarks
PART I DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)								
45. Specific instructional needs extisting in district		SEC G (36)						
46. Changes in an im- provements planned		SEC G (36)						
47. Last and describe innovative and/or exemplary programs		SEC G (37)						
48. Check list of items enclosed, signature	49 –41	SEC H						
PART II		PART II						
49. Has centralized . library/media center	1	SEC A	ESSPr, Q34				F/SS, Colo	
50. Number of magazine subscriptions, volumes in collection, volumes aided last year, audic visual items in collection		SEC A						
51. Has resource cen- ters outside central library/media cen- ter	<u>-</u>	SEC A	ESSPr, Q35 ESSPr, Q36			-	F/SS, Colo.	
52. Has access to district library/mediacenter		SEC A	ESSPr, 035 ESSPr, 036				F/SS, Colo	
		\$				_	_	

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General Statistics Q(9)

		Remarks		Colo	Colo, F/SS cannot specify of program if operating without federal funds						
		Category Breakout		F/SS, Co	F/SS, Co						
1 6 6 6 6 6 6 6 6 6	DIFFCTent	Time of Collection									
		Source or Level		F/SS, Colo.							
		Identical									
Í	Federal/	State Variable		CPIR, III (A 1-8)	ESS-Pr, Q15 ESS-Pr, Q16						
		colo Item		SEC A	SEC B (a-f)	SEC C. 1		SEC C, 1	SEC C, 1	SEC C, 1	
		Conn Form & Item Form					•				
		Data Type	PART II DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)	53. Total spent last year, no. of pupils per pupil cost for: books, audio-visual materials, periodicals and newspapers	S4. Special programs in school: in operation, with federal funds by none, academically latented, compensatory, continuing education, handicapped, vocational, technical	55. All of the follow-ing are taught in K-3, taught in 4-6 a. Colorado History	Civil Government Constitution k. History, culture contribution of	American Indian c. History, culture contribution of Hispano	d. History, culture contribution of	e. History, culture contribution of	Oriental

General Statistics. Q (10)

***************************************		Category Remarks			F/SS, Colo.							-	
	Different	Time of Car			<u>,</u>					_			
	Α	Source or Level			F/SS, Colo.					_			
(10)		Identical						•				•	
3"	Federal/	State Variable			ESS. Tc, Q25								
		Colo Form & Item		SEC C, 1	SEC C, 2		SEC C, 3 SEC C, 3	ပ်	ပ် ပ်	ာ် င်	SEC C, 3 SEC C, 3	SEC C, 3	SEC C, 3
		Conn Form & Item						-					
		Data Type	PART II DISTRICT SUMMARY Colorado CDE Form 4 (Cont.)	g. Sex education	56. Average preparation time in minutes per day per teacher for grades: Prek, K, 1, 2, 3, 4, 5, 6, 7,8	beginning to implement, implement for all of the follow-	a. learn teaching b. differentiated staff assign-	-		i. Learning packageg. Unstructuredlabs	h. Structured labs i. Independent		k. Resource Centers

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General Statistics Q(11)

Conn	9	Federal/ State		Source		Category	
Ö	Item	Variable	Identical	or Level	8	Breakout	Remarks
					-		
SEC	ပပ						
SEC	က် ကို ကို ပ		_				
SEC	C (4)						
SEC	c (5)						
SEC D	Q				_		
PART	III						
SEC	Α .	ESS-Pr, Q34	_		•	F/SS, Colo.	
SEC A	⋖						

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General Statistics
Q (12)

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SEC A
SEC A
SEC A
SEC B, a
SEC B, c
SEC B, e SEC B, f
SEC C

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General Statistics Q(13)

		Remarks									
		Category Breakout						•			
	Different	Time of . Collection									
	Д	Source or Level									
(21)		Identical									
ý	Federal/	State Variable									
		Colo Form & Item		SEC D				a cas		SEC F	
		Conn Corn Form &						·			
		Data Type	NIOR HIGH RT	68. Practices in which staff members and/or students engage: studying, beginning to implement, imple-	mented by team teaching, differen- tiated staff assign- ments, use of lay	grouping, modular schedule, learning packages, open labs, seminars, indepen-	dent study, learning labs, resource cen- ters, multi-media usage, non-graded levels, non-graded	marks. 69. No of class sections with enrollment of: 10 or fewer, 11-20,	21-30, 31-35, more than 35, total number of class sections	70. Attached schedule of classes, date, principal's signature	

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General Statistics Q(14)

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			Federal/	-1	- 1	ייייייייייייייייייייייייייייייייייייייי		
Data Type	Conn Corm Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
PART III JUNIOR HIGH SCHOOL REPORT (Cont)								
71. Organized as: 7-8, 7-9, other		No Item No.	-					
72. Total Membership		No Item No.	-					
73. List of courses by descriptive information on courses		No Item No.	•					
PART IV SENIOR HIGH SCHOOL REPORT		PART IV						
74. Has centralized library/media center		SEC A	ESS.pr, Q34				F/SS, Colo.	
75. Number of: magazine subscriptions, volumes added last year, audio-visual		SEC A						
76. hesource center outside central library/media cen- ter		SEC A	ESS Pr., Q35				F/SS, Colo.	
77. Access to district library/media cen- ter		SEC A	ESS Pr, Q35 - Pr, Q36				F/SS, Colo.	
78. Total spent last year, no. of pupils per pupil cost, for books, audio-visual materials, periodi- cals and newspapers		SEC A	CPIR, III (A 1-8)				F/SS, Colo.	
Section 1 Sectio		7		, Dec. 1	A Total Control of the Control of th			

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General Statistics (0(15)

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		Remarks				٠.								
		Category Breakout		F/SS, Colo.									•	
	Different	Time of Collection												
	A	Source or Level												
Q (15)		Identical												
ğ	Federal/	41		ESS- Pr,	ESS-Pr, Q16				annani_			·		
		. Colo Form & Item		SEC B					SEC C(1)	SEC C(2)	SEC C(3)			
į		Conn Corn Form &		_										
		Data Type	PART IV SENIOR HIGH SCHOOL REPORT (Cont.)	79. Special programs:	in operation with federal funds for all the following	a. none b. academically talented	c. compensatory d. continuing	e. handicapped f. vocational/ technical	80. Check requirements for graduation based on: 3 years, four years, other	81. Insert total requirements for graduation: no. of units or no. of semester hours	82. Subject matter requirements in units or semester hours	for: English, Social Studies, Science, Mathematics, Fine Arts, Practical	Arts, Health, Phy- sical Ed., Electives Other	

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General Statistics
Q (16)

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	Remarks		
	Category Breakout		
Different	Time of Collection		
	Source or Level		
	Identical		
7	rederal/ State Variable		
	Colo Form & Item	SEC D	SEC E
	Conn Corn Form &		
	Data Type	PART IV SENIOR HIGH SCHOOL REPORT (Cont.) 83. Practices in which staff members and/ or students engage: studying, beginning to implement, implemented by team teaching, differentiated staff assignments, use of lay assistants, ilexible grouping, modular schedule, learning packages, open labs, seminars, independent study, learning	ters, multi-media usage, non-graded levels, non-graded marks 84. Enrollment: boys, girls, total by art club, drama and/or speech, future farmers, G.A.A., I.R.C., Jr. Red Cross, Letterman's Club, National Honor Society, Rep. Club, Science Club, Student Council, Y, Teens, other

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General Statistics Q(17)

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	Remarks									
	Category Breakout									
Different	Time of Collection									
	Source or Level								•	
	Identical		·							
Podemal /	State Variable					•			_	
	Colo Form & Item	,	SEC F	SEC G	No Item No.	No Item No.				
	Conn Form & Item					101	ED036	No Item No.	EDO 35 #1 EDO 50 #1,2	
	Data Type	PART IV SENIOR HIGH SCHOOL REPORT (Cont.)	85. No. of class sections with enrollment of: 10 or fewer, 11-20, 21-30, 31-35, more than 35, total no.	86. Attached schedule of classes, date, principal's signature	87. Organized as: 9-12, 10-12, other, total membership	88. List of courses by descriptive information on courses	OPENING SCHOOL ENROLL- MENT ED036	 Town, completed by, date 	2. No. of classroom teachers needed for which grades or subject areas.	

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General Statistics Q(18)

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			Federal/		- 1	Ultrerent		
Data Type	Conn Colo	Colo Form & Item	State Variable	Identical	Source or Level	Time of . Collection	Category Breakout	Remarks
OPENING SCHOOL ENROLL- MENT ED036 (Cont.)								
3. Check one; elimination of teacher	. 2	5.5.5			•			
shortage: a. increase class	2a							
size b. combine classes	2b							
c. reassign teach- ers	2c							
d. drop courses,	24							
e. change attendance	e 2e							
f. employ temporary	2£							
g. increase the no.	28				-			
periods for one or more teachers							_	
h. other	2h							
*DISTRICT'S ANNUAL FINANCIAL REPORT General Fund 100 Series		CDE Form 3						
1. District no., county school year		No Item No.						
2. Award of contracts		No Item No.						
3. Information on person preparing report		No Item No.						
							•	
						=		

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General Statistics Q(19)

Form & Item Val
No Item No.
Pg.2:3,4,5
Pg.2:10-17
Pg.2:20-24
Pg.2:27-37
Pg. 3: 2-35 Pg. 4: 2-33
Pg. 5:10
Pg.5:13-16
Pg.5:18
Pg.5:23-27 Pg.6:3-11
Pg.6:13

General Statistics Q (20)

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	Conn	Colo	Federal/ State		Source	Time of	Category	
Data Type	Form & Item Form &	Form & Item	Variable	Identical	or Level	Collection	Breakout	Remarks
DISTRICT'S ANNUAL FINANCIAL REPORT (Cont.)		CDE Form 3						
15. Total beginning current assets, receipts, incoming transfers, and ending liabilities		Pg.6:15			,,			
16. Expenditures		Pg.6:22-36 Pg.7:1-34	CPIR III (A 1-8)				F/SS Colo.	
Total current expenses except community services		Pg.8:21	CPIR III (A 1-8)			,		
Community services		Pg.9:1-7						
Total current expenses (including community services)		Pg.9:9						
Capital outlay		Pg.9:11-18						
Debt service		Pg.9:20-29						
Total expenditures (current, capital, debt)		Pg.9:31						
Outgoing transfers		Pg.10:3-13		_				
Total outgoing transfers		Pg.10:15						
Ending current assets		Pg.10:17-21						
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General Statistics Q (21)

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Data Type	Conn Corm & Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
DISTRICT'S ANNUAL FINANCIAL REPORT (Cont.)								
26. Beginning liabilities (and/or payroll deductions)	_	Pg.10:23						
27. Total expenditure, outgoing transfers, ending current and beginning liabilities		Pg.10:25						
28. General fund deficit		Pg.10:30-36						
29. Federal expenditures for federal programs		Pg.11:1-30 Pg.12:1-35	CPIR III (A 1-8)				•	
Band Redemption Fund 200 Series								
30. Beginning current assets		Pg.13:1-5						
31. Receipts		Pg.13:7-27		·			-	
32. Total receipts		Pg.13:29						
33. Incoming transfers		Pg.13:31-35		•				
34. Ending liabilities (and/or payroll deductions)	····	Pg.14:1						
35. Total beginning current assets, receipts incoming transfers, and ending liabil-ities	· · · · · · · · · · · · · · · · · · ·	Pg.14:3				, P. P		
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General Statistics Q (22)

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Data Type	Conn Conn Form &	Colc Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
DISTRICT'S ANNUAL FINANCIAL REPORT (Cont.)					_			
36. Expenditures		Pg.14:9-20						
37. Total expenditures		Pg.14:22						
38. Outgoing transfers		Pg.14:24-28		٠				
39. Ending current assets		Pg.14:30-34		_				
40. Beginning liabil- ities (and/or pay- roll deductions		Pg.15:1			,			
41. Total expenditures, outgoing transfers, ending current assets, and beginning liabilities		Pg.15:3						
Building Fund Series 300								
42. Beginning current assets		Pg.16:1-5						
43. Receipts		Pg.16:7-24						
44, Total receipts		Pg.16:26						
45. Incoming transfers (from other school districts)		Pg.16:28		-				
46. Ending liabilities (and/or payroll deductions)		Pg.16:30						•

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General Statistics Q(23)

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	Conn	Colo	Federal/ State		Source	Time of	Category	Domondo
DISTRICT'S ANNIAL	ב ביוו פי דרפוו		tar.ran					
FINANCIAL REPORT (Cont.)								
Total beginning current assets, receipts incoming transfers and ending liabil-ities	Ø	Pg.16:32						
Expenditures		Pg.17:1-19		,				
49. Total expenditures		Pg.17:21						
Outgoing transfers		Pg.17:23-27						
Ending current assets		Pg.17:29-33						
Beginning liabil- ities		Pg.18:1						
Total expenditures, outgoing transfers, ending current assets and beginning liabilities		Pg.18:3						
Capital Reserve Fund 400 Series								
54. Beginning current assets		Pg.19:1-5					_	
Receipts		Pg.19;7-28						
Total receipts		Pg.19:30					_	

General Statistics Q(24)

Data Type Form DISTRICT'S ANNUAL FINANCIAL REPORT (Cont.) 57. Incoming transfers 58. Ending liabilities 59. Total beginning current assets, re- ceipts, incoming transfers, and end-	Conn Co Form & Item Form & Pg.19 Pg.19 Pg.20 Pg.20 Pg.20 Pg.20 Pg.20 Pg.20 Pg.20 Pg.20	10 Item :32 :34 :1 :6-31 :33	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
	,	Pg. 19:32 Pg. 19:34 Pg. 20:1 Pg. 20:6-31 Pg. 20:33 Pg. 20:35						
		Pg. 19:32 Pg. 19:34 Pg. 20:1 Pg. 20:6-31 Pg. 20:33 Pg. 20:35			_			
		Pg. 19:34 Pg. 20:1 Pg. 20:6-31 Pg. 20:33 Pg. 20:35						
	<u> </u>	Pg. 20:1 Pg. 20:6-31 Pg. 20:33						
s a r	•	Pg.20:6-31 Pg.20:33 Pg.20:35						
Expenditures		Pg.20:33						
Total expenditures		Pg.20:35						
Outgoing transfers		-						
Ending current assets	<u> </u>	Pg.21:1-5						
Beginning liabil- ities (and/or pay- roll deductions)		Pg.21:7		•				
Total expenditures, outgoing transfers, ending current assets, and beginning liabilities		Pg.21:9		•		_		
Fixed Asset Investment								
Fixed asset invest- ment by type of as- set		Pg.22:1-25						
Total fixed asset investment by type of asset		Pg.22:28-33						

F 2017 A their graph T. Par. Free multiposes

General Statistics Q (25)

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			Fedenal/		<u> </u>	Different		
Data Type	Conn Colc Form & Item Form & I	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
DISTRICT'S ANNUAL FINANCIAL REPORT (Cont.)		CDE Form 3						
Capital Liabilities								
68. Bonded indebtedness		Pg.23:1-13						
69. Total bonded indebt edness	1	Pg.23:15-2						
70. Refunded bond infor mation		Pg.23:22-2						
71. Information on escrain account (general obligation bonds covered by escrain agreements)		Pg.23:30-31			-			
LOCAL ACCOUNTABILITY REPORT		No Form No.						
1. For each goal: a. major performance objective for	.	No Item No.	•					
b. major related		No Item No.						
s.arr activity c. level of student attainment		No Item No.				_		
COMPREHENSIVE EDUCATIONAL PLANNING ACT REPORT	 13	No Form No.					·	
1. For each school-				_		_		
community involve- ment committee:								
a. # of community		7						
representatives v. # of professional nersonnel		1						
Karaamaa								

General Statistics Q (26)

Conn Data Type Form & Item F COMPREHENSIVE EDUCATIONAL PLANNING ACT REPORT(Cont.) c. # of students 2. Other school community involvement activities 3. Listing of student needs a. elementary level b. secondary level b. secondary level condary level b. secondary level b. secondary level b. secondary level condary level b. secondary level b. secondary level condary level b. secondary level condary level		11.2.2.71				•	
Conn Form & Item		rederal/	_	1	Different		
COMPREHENSIVE EDUCATIONAL PLANNING ACT REPORT(Cont,) c. # of students 2. Other school community involvement activities 3. Listing of student needs a. elementary level b. secondary level 4. Listing of general goals for students a. elementary level b. secondary level b. secondary level b. secondary level	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
	1			,			
	-						
	6						
	2p		_	_			
	3a 3b						
5. Listing of specific objectives for students a. elementary level b. secondary level	4a 4b						
6. Listing of operational objectives for staff. All of the following by elementary, second-			•			·	^
ceaching-learning	5a 1,2	_					
	5b 1,2				_		
c. cocurricular programs	5c 1,2						

Property 1

General Statistics Q (27)

			out Kemarks												F/SS, Colo. F/SS, sex, ethnic group, marital status	
			Breakout		_								_		F/SS,	
	Different	Time of	Collection					_	_							
	-	aoanos	or Level													
(77)	1		Identical											•	-0- -	
9	Federal/	State	Variable												ESS-Te, Q20 ESS-Te, Q21 ESS-Te, Q2	
		0.	Item		54 1,2	5e 1,2	Sf 1.2		5g 1,2	5h 1,2	51 1,2	CP-1	No Item No.	1-4	6 - 6	10-11
		Conn	Form & Item Form &								ν ₀					
			Data Type	COMPREHENSIVE EDUCATIONAL PLANNING ACT REPORT(Cont.)	d sunnorting ser-	dents e. supporting services for the			staff g. school policies	and practices h. management practices	i. resources (personnel, facilitie funding)	CDE CERTIFICATED PERSONNEL	1. County, county code district file no., legal no.	2. Last name, first name, MI, maiden name	3. Social security no., sex, marital status, birthdate day, yr. ethnic group, trans code	4. Name of building where assigned, school code

General Statistics Q (28)

_				v	<u>. </u>	·		
	Remarrks			F/SS, salary, full time, experience, this district, total, colleg preparation		F/SS year of degree	F/SS assignment	
	Category			F/SS Colo.		F/SS, Colo	F/SS, Colo.	
Different		,						
	Source or Level	•						
	Identical			, 37 , 50		64,	q.	
Federal/				ESSTe, Q24 ESSTe, Q26 ESSTe, Q34 ESSTe, Q36, 2		ES\$Te, Q46,	ESSTe, Q29a	
	Colo Form & Item	CP-1	12-17	18-34		35-44	45-47	
	Conn Col Form & Item			d)				
	Data Type	CDE CFRTIFICATED. PERSONNEL (Cont.)	5. Position, function, scope, level, daily prep. credits for next cert.	6. Work days, part time regular salary, additional salary, employ status, experience this district, other Colo. out of state, total previous years of employment, resi-	dence, certificate held, issued mo. and year, expires mo. and year, issued by level of authority, college preparation	7. Institution first degree, institution code, first degree, degree code, year of degree, institution highest degree, in- stitution code, high est degree, degree code, year of degree	8. Subject area as- signed, subject code, semester hours	

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General Statistics Q (29)

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	Remarks												
	Category Breakout			F/SS, Colo,									
Different	Time of Collection												·
	Source or Level											-	
	Identical			. 50								_	
Federal/	State Variable			ESSTe, Q47									
	Colo Form & Item	CP-1	48-51	52-57	28	No Item No.	CDE Form 52	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.	No Item No.
	Conn Conn Form &			Ĕ	_								
	Data Type	CDE CERTIFICATED PERSONNEL (Cont.)	9. Teaching area qualified for levels, positions, functions	10. Teaching areas, code, levels, posi- tions, code, function	11. Leave of absence, returned from leave, terminated-resigned, discharged, deceased	12. Signature, date	COUNTY TREASURER'S STATEMENT TO SCHOOL DISTRICT	1. District No., mo.	2. Beginning balance	3. General fund receipts series	4. General fund dis- bursements: series.	5. Warrants requested during this period-receipts: series	6. Disbursements: series

General Statistics Q (30)

			Federal/		α	Different		
Data Type	Conn Conn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
COUNTY TREASURER'S STATEMENT TO SCHOOL		CDE Form 52						
DISTRICT (Cont.) 7. Home redemption fund: receipts		No Item No.			-			
8. Disbursements: series		No Item No.						
 Capital reserve fund - receipts: series 		No Item No.						
10. Disbursements: series	•	No Item No.					,	
 Treasurer's sig- nature, date, county 		No Item No.						
SUMMARY SHEET		CDE-74						
1. Audio visual: equipment, materials, total by science,		No Item No.		·				
eign language, his- tory, economics, geography, civics, english, reading, industrial arts				•				
2. Non audio visual: equipment, materials total by science, math, modern foreign languages, history, economics, geography	₩ E S	No Item No.				•		,
civics, english, reading, industrial arts								

Adaptive Province Community

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General Statistics Q (31)

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			Federal/	_1_		Different		
Data Type	Conn Form & Item Form	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
SUMMARY SHEET (Cont.)		CDE-74						
3. Finding information label, federal, state. district, total, science, math modern foreign languages, history, economics, geography civics, english, reading, industrial arts		No Item No.						
4. Encumbered and re- imbursed: label, federal, state, district, total, science, math, mod- ern foreign language history, economics, geography, civics, english, reading, industrial arts		No Item No.	CPIR, IVC1				F/SS	F/SS Expenditures under federal NDEA III only
	No Form No. No Item No.							Conn. questions, 2,3,5,7,8 answered as yes-no
man treatment of animals	mals					_		

ERIC Full Taxt Provided by ERIC

General Statistics Q (32)

			Federal/		6	Different		
Data Type	Conn Conn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Categ o ry Breakout	Remarks
CHECKLIST FOR VISITATIONS (Cont.)								
3. Provides required courses on citizenship, (eighth-grade, secondary), effects of alcohol and narcotics	8						,	
4. Compliance with standards in "equivalent instruction, elsewhere", transfer ability, accreditation	თ ა							
5. Cited for violations of: fire, health, building code	.t							
6. Teachers designated as eligible for reimbursement of salary: teach grades 1-12, instruct secular subjects, part time administrator, employed full time or have B.A., do not teach religious matter	w							
7. No. and percent of children not meeting preferential admission requirement	ω				-			
		7						

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General Statistics Q (33)

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			Federal/		- 1	Different		
Data Type	Conn Conn Form &	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
CHECKLIST FOR VISITATIONS (Cont.)	<u>တ</u>							
8. Admission not on basis of race, religion, creed, or national origin	٠.							
9. Principal, date	No Item No.							
10. Absence of religious doctrine by teacher for whom reimbursement is sought demonstrated by: visitation, inspection, materials, school	ω							
other								
<pre>11. Pertinent observa- tion</pre>	თ					_	•	
12. Observer, date	No Item No.							
TEACHER VACANCY SURVEY ED050	ED 050		-					
l. Town, completed նy, date	No Item No.							
2. Pupil personnel and other vacancies: area by no. of openings, grades etc.	m							
3. Special education teachers/therapists: subject by no. of openings grades etc.	ಪ							

ERIC Full Year Provided by ERIC

General Statistics () (34)

			3	(1)				
			Federal/		Q	Different		
Data Type	Conn Form & Item	Colo Form & Item	State Variable	Identical	Source or Level	Time of Collection	Category Breakout	Remarks
TEACHER VACANCY SURVEY ED050 (Cont.)	ED050							
4. Supervisory/administrative vacancies position by no. of openings, grades etc.	ഗ	•				•		
NON-PUBLIC SCHOOL SECULAR EDUCATION	No Form No.				,			
Non public school secular education l. school completed by No Item No. town, telephone,	No Item No.	,						
2. Signature, date, notary	No Item No.			_				
3. Name of teacher, social security no. grade and subject, date employed, degree status, time teaching, actual salary	No Item No.		ESS -Te, Q24 ESS -Te, Q29a, b ESS -Te, Q45, 48	,48	F/SS, Conn.	H	F/SS, Conn.	F/SS salary grade taught, degree
4. Title of textbook, publisher, date, public school systems using text, subject area, grade where used, no. bought, cost, total cost	No Item No.					·		
					_	<u> </u>		

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General Statistics Q(35)

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Remarks						F/SS no. by target groups, at district			F/SS at district level		
Category Breakout			F/SS, Conn.			F/SS, Conn.	F/SS, Conn.		F/SS, Conn.		
Fifferent Time of Collection											
Source or Level						F/SS, Conn.	F/SS, Conn.		F/SS, Conn.		
Identical											
Fedoral/ State Variable			ESS-Pr, 07			CPIR, IB	CPIR, IB		CPIR III A 1-8	_	
Colo Form & Item											
Conn Form & Item			2	3 a-d	3 e-g	4	, 5a	. 5b	10	7	No Item No
Data Type	NON-PUBLIC SCHOOL SECULAP EDUCATION (Cont.)	5. No. of students meeting require- ments of full time attendance, grades 1-12, Connecticut* resident, not re- quested as exempt: grades 1-8, grades 9-12	6. Total full time students	7. Affidavit of open enrollment	8. No. of open enroll- ment students	9. No. of educationally deprived children	10. No. of children requiring special education	ll. Amount of reimbursement for special edservices	12. Total operating costs	13. 2 copies of audit	14. Prepared by, date